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ABSTRACT

This continuing education course syllabus presents information on the collection of vital and health statistics, lists of agencies or organizations involved in statistical collection and/or dissemination, annotated bibliographies of statistical sources, and guidelines for accessing statistical information. Topics covered include: (1) the reporting system for vital and health statistics (with sample reporting forms provided) and sources of national, international, state, and local health statistics; (2) statistical sources for chronic conditions and special health problems including abortion, accidents, alcoholism, blindness, cancer, diabetes, drug abuse, hypertension, mental health, nutrition, product injury, smoking, and venereal disease; (3) statistics for health care planning and administration including general medical care, health manpower, health facilities and utilization, health care financing, and health education; (4) demographic, socioeconomic, and housing statistics; (5) indexes and abstracts containing sources of statistics and selected journals routinely having statistical articles; (6) acquisitions aids (with addresses provided for obtaining them); (7) a general strategy for accessing statistics; and (8) general bibliographies on or guides to health statistics. A glossary of terms, a core list of the 50 major publications in health statistics, a list of 25 questions intended as classroom exercises, and a suggested course timetable are also provided. (ESR)

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CE 32

Statistical Sources for Health Science Librarians

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IR050463

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AGENDA

CE 32 - Statistical Sources for the Health Sciences Library

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9:15 - 9:30	Introduction
9:30 - 10:30	Reporting System for Vital and Health Statistics
10:30 - 10:45	Break
10:45 - 11:15	Statistical Sources for Chronic Conditions and Special Health Problems
11:15 - 12:15	Statistics for Health Care Planning and Administration
12:15 - 2:00	Lunch and Practical Exercises
2:00 - 2:30	Discussion of Exercises
2:30 - 3:00	General Statistics
3:00 - 3:15	Break
3:15 - 4:00	Indexes and Abstracts
4:00 - 4:30	General Stategy for Locating Information
4:30 - 5:00	Core List

Statistical Sources for the Health Sciences Library

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CE 32: Statistical Sources for the Health Sciences Library

A. Objectives

At the conclusion of the course, the participant should be able to:

1. Describe the vital and health statistics reporting system of the United States
2. Define terms commonly used in reporting vital and health statistics
3. Identify agencies and organizations which collect and disseminate statistical information in the health field
4. Identify the major publications of health statistics
5. Select and use the proper indexes and abstracts which aid in finding statistical information

B. Course Organization

The course is organized around the major subject categories of health statistics:

1. Vital and Health Statistics
2. General Medical Statistics
3. Health Manpower
4. Health Facilities and Utilization
5. Health Care Financing
6. Health Education
7. General Statistics - Demographic and Socioeconomic

Agencies and organizations that collect and publish in each category are discussed, as well as the major publications that exist in each.

Weak collection areas are pointed out; hints for sources of selection and acquisition are given, and strategies to use in searching for specific statistical information are considered.

I. Introduction

Many health sciences librarians have expressed a need for better knowledge of statistical sources. They are finding statistical questions being asked more frequently by health professionals due to the increased importance given to health planning and health research. Public concern with health related issues has also fostered curiosity in health statistics.

Although more and more health statistics are being gathered, little is being done to make them accessible. Many sources are government publications, local, state, federal, and international, with which health sciences librarians have had little or no contact. Other sources are private health organizations whose publications are largely "fugitive." In addition, many statistical publications are not accessible through the major indexes to health sciences literature. Consequently, reference librarians find themselves in the awkward position of not knowing where to turn for answers to questions of a statistical nature.

The purpose of this continuing education course is to acquaint reference librarians with the vital and health statistics reporting system as well as the major sources of health statistics; to help them analyze statistical questions and formulate search strategies which will enable them to consult the appropriate publications, indexes, or health agencies.

II. The Reporting System for Vital and Health Statistics

A. Reporting System

Major responsibility for compiling vital statistics rests with the National Center for Health Statistics. The country's official vital statistics are published by the Center's Division of Vital Statistics. The division obtains its basic data either directly or indirectly from registration certificates. Each state is a separate jurisdiction, acting under its own laws and standards and is subject only to advice, persuasion and leadership from the federal government.

Reports of births, deaths and occurrence of disease originate with the physician. He or she sends the report to the local health department on the required form. The local health department makes a record of the information received from the physician and uses it as necessary for public health purposes.

The local health department then sends the original report to the state health department for its information, use and permanent recording. The state health department, in turn, transmits summary or duplicate reports to the federal health authority, the Public Health Service of the U.S. Department of Health Education and Welfare. U.S. PHS receives this information from 50 states and tabulates, correlates, and collates this information reporting back to the states at periodic intervals. PHS also passes the information on to the international health authority, the World Health Organization, which similarly tabulates the data and reports it to all of its member countries.

B. Definitions

Vital Statistics:

Describe events related to individuals entering or leaving life or changing their civil status. They come from records of live births, deaths, fetal deaths, marriages, divorces, adoptions, legitimations, annulments, and separations. They provide information on the number and characteristics of vital events that take place during given periods of time.

Natality:

Birth; usually expressed in rates

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[1]Robert D. Grove and Alice M. Hetzel. Vital statistics rates in the United States, 1940-1960. Washington, D.C.: National Center for Health Statistics, 1968. p. 3.

[2]Stedman's Medical Dictionary, 23rd ed. Baltimore: Williams and Wilkins, 1976.

SOURCE: Vital Statistics of the United States. Volume I - Natality. Washington D.C.: National Center for Health Statistics, 1977.

GENERAL PATTERN OF VITAL REGISTRATION AND STATISTICS IN THE UNITED STATES

RESPONSIBLE PERSON OR AGENCY	BIRTH CERTIFICATE	DEATH CERTIFICATE	FETAL DEATH CERTIFICATE (Stillbirth)	REPORTING OFFICIALS	MARRIAGE RECORD	DIVORCE OR ANNULMENT RECORD
Physician, Other Professional Attendant, or Hospital Authority	1. Completes entire certificate in consultation with parent(s). Physician's signature required. 2. Files certificate with local office of district in which birth occurred.	1. Completes medical certification and signs certificate. 2. Returns certificate to funeral director.	1. Completes or reviews medical items on certificate. 2. Certifies to the cause of fetal death and signs certificate. 3. Returns certificate to funeral director. 4. In absence of funeral director, files certificate.	Clerk of Local Government	1. Receives application for marriage license, and reviews application for completeness, accuracy, and compliance with law. 2. Issues marriage license, and records date. 3. Checks completeness of entries about the marriage ceremony. 4. Sends specified information regarding marriage to State Registrar.	↓
Funeral Director	↓	1. Obtains personal facts about deceased. 2. Takes certificate to physician for medical certification. 3. Delivers completed certificate to local office of district where death occurred and obtains burial permit. permit.	1. Obtains the facts about fetal death. 2. Takes certificate to physician for entry of causes of fetal death. 3. Delivers completed certificate to local office of district where delivery occurred and obtains burial permit.	Marriage Officiant	1. Checks the validity of the marriage license. 2. Performs the marriage ceremony. 3. Certifies to the facts of the marriage ceremony. 4. Returns the record to the license clerk within the legally prescribed time.	↓
Local Office (may be Local Registrar or City or County Health Department)	1. Verifies completeness and accuracy of certificate. 2. Makes copy, ledger entry, or index for local use. 3. Sends certificates to State Registrar.	1. Verifies completeness and accuracy of certificate. 2. Makes copy, ledger entry, or index for local use. 3. Issues burial permit to funeral director and verifies return of permit from cemetery attendant. 4. Sends certificates to State Registrar.		Clerk of Court	↓	1. Provides form for report to plaintiff or attorney, or makes entries on such form from petition for decree. 2. Verifies entries on return form. 3. Enters information on final decree. 4. Sends completed report to State Registrar.
City and county health departments use certificates in allocating medical and nursing services, followups on infectious diseases, planning programs, measuring effectiveness of services, and conducting research studies.				Attorney for Plaintiff	↓	1. Enters personal characteristics of spouses. 2. Returns form to Clerk of Court.
State Registrar, Bureau of Vital Statistics	1. Queries incomplete or inconsistent information. 2. Maintains files for permanent reference and as the source of certified copies. 3. Develops vital statistics for use in planning, evaluating, and administering State and local health activities and for research studies. 4. Compiles health related statistics for State and civil divisions of State for use of the health department and other agencies and groups interested in the fields of medical science, public health, demography, and social welfare. 5. Prepares copies of birth, death, fetal death, marriage, and divorce certificates or records for transmission to the National Center for Health Statistics.					
Public Health Service National Center for Health Statistics	1. Prepares and publishes national statistics of births, deaths, fetal deaths, marriages, and divorces; and constructs the official U.S. life tables and related actuarial tables. 2. Conducts health and social-research studies based on vital records and on sampling surveys linked to records. 3. Conducts research and methodological studies in vital statistics methods including the technical, administrative, and legal aspects of vital records registration and administration. 4. Maintains a continuing technical assistance program to improve the quality and usefulness of vital statistics.					

NOTE.—In some States there is no central file for marriage and divorce records at the State level.

Live birth:

> Any product of conception which gives signs of life after birth, regardless of the length of pregnancy.[3]

Mortality:

> Death; usually expressed in rates

Morbidity:

> The extent of illness, injury or disability in a defined population; usually expressed in general or specific rates of incidence or prevalence.[3]

Incidence:

> In epidemiology the number of new cases of a specific disease, infection, or some other event having onset during a prescribed period of time in relation to the unit of population in which it occurred.[3]

Prevalence:

> In epidemiology the total number of cases of a disease in existence at a certain time in a designated area.[3]

Acute disease:

> A disease which is characterized by a single episode of a fairly short duration from which the patient returns to his normal or previous state and level of activity.[4]

Chronic disease:

> Diseases which have one or more of the following characteristics: are permanent; leave residual disability; are caused by nonreversible pathological alteration; require special training of the patient for rehabilitation; or may be expected to require a long period of supervision, observation, or care.[4]

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[3]U.S. National Center for Health Statistics. Vital statistics of the United States--1973. Vol. I - Natality. Rockville, Md., 1977. p. 4-3)

[4]U.S. Congress. House. Committee on Interstate and Foreign Commerce. Subcommittee on Health and the Environment. A discursive dictionary of health care. Washington, D.C.: Government Printing Office, 1976.

Notifiable disease:

Reportable infectious diseases, most commonly reported as morbidity statistics (listed below, numbers refer to International Classification of Diseases, 8th ed., 1965)[5]

000 Cholera
001 Typhoid fever
002 Paratyphoid fever
004 Bacillary dysentery
005 Amoebiasis
010-012 Tuberculosis of the respiratory system
013-019 Other forms of tuberculosis
020 Plague
021 Tularaemia
022 Anthrax
023 Brucellosis
030 Leprosy
032 Diphtheria
033 Whooping-cough
034 Streptococcal sore throat and scarlet fever
034.1 Scarlatina
088 Relapsing fever
090-097 Syphilis and its sequelae
098 Gonococcal infections
035 Erysipelas
036 Meningococcal infection
037 Tetanus
040-043 Acute poliomyelitis
050 Smallpox
052 Chickenpox
055 Measles
060 Yellow fever
062-065 Viral encephalitis
070 Infectious hepatitis
071 Rabies
072 Mumps
073 Psittacosis
076 Trachoma, active
080-083 Typhus and other rickettsioses
084 Malaria
086-087 Trypanosomiases
100 Leptospirosis
470-474 Influenza

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[5] World Health Statistics Annual, 1973-1976. Genève: World Health Organization, 1976. (p. IV-V)

C. Reporting Form Samples

CONFIDENTIAL MORBIDITY REPORT

STATE OF CALIFORNIA (SEND TO LOCAL HEALTH OFFICER) DEPARTMENT OF HEALTH

PATIENT'S LAST NAME | FIRST NAME | MIDDLE INITIAL

ETHNIC ORIGIN	SEX	AGE	DATE OF BIRTH	SOCIAL SECURITY NUMBER

	NUMBER	STREET	CITY	COUNTY
PRESENT ADDRESS				
USUAL ADDRESS				

DISEASE—(VIRAL HEPATITIS, TYPE A, TYPE B OR UNSPECIFIED; SYPHILIS, TUBERCULOSIS, SEE OVER) | DATE OF ONSET

ATTENDING PHYSICIAN (NAME AND ADDRESS); HOSPITAL, INSTITUTION OR OTHER REPORTING AGENCY. | DATE OF DIAG.

DATE OF DEATH

PH 110 (11-73) ① △ 000

TUBERCULOSIS DIAGNOSTIC INFORMATION

DIAGNOSIS	REACTIVATION	BACTERIOLOGY	EVIDENCE SUPPORTING DIAGNOSIS (CHECK ONE OR MORE)	EXTENT (IF PULMONARY)
☐ PRIMARY ☐ PULMONARY ☐ EXTRAPULMONARY SITE:	☐ YES ☐ NO ☐ UNDETERMINED	SMEAR: ☐ POS ☐ NEG CULTURE: ☐ POS ☐ NEG NOT DONE ☐ ☐ TYPICAL (M. tuberculosis) ☐ ATYPICAL →	☐ POS. TB SKIN TEST ☐ X-RAY ☐ BACTERIOLOGIC ☐ HISTOLOGIC	☐ MINIMAL ☐ MODERATELY ADVANCED ☐ FAR ADVANCED

☐ RECENT TUBERCULIN CONVERTER ONLY

CIRCLE NO. OF RUNYON GROUP IF ATYPICAL MYCOBACTERIA: I II III IV

SYPHILIS DIAGNOSTIC INFORMATION

INFECTIOUS	NON-INFECTIOUS
☐ PRIMARY ☐ SECONDARY ☐ EARLY LATENT	☐ LATE LATENT ☐ NEUROSYPHILIS, ASYMPTOMATIC ☐ NEUROSYPHILIS, CLINICAL ☐ CARDIOVASCULAR ☐ OTHER LATE _____ SPECIFY ☐ CONGENITAL

EPIDEMIOLOGIC NOTE: TO MINIMIZE SPREAD, PROMPT CONTROL MEASURES ARE ESSENTIAL. PLEASE PHONE REPORTS FOR INFECTIOUS CASES.

HEPATITIS DIAGNOSTIC INFORMATION

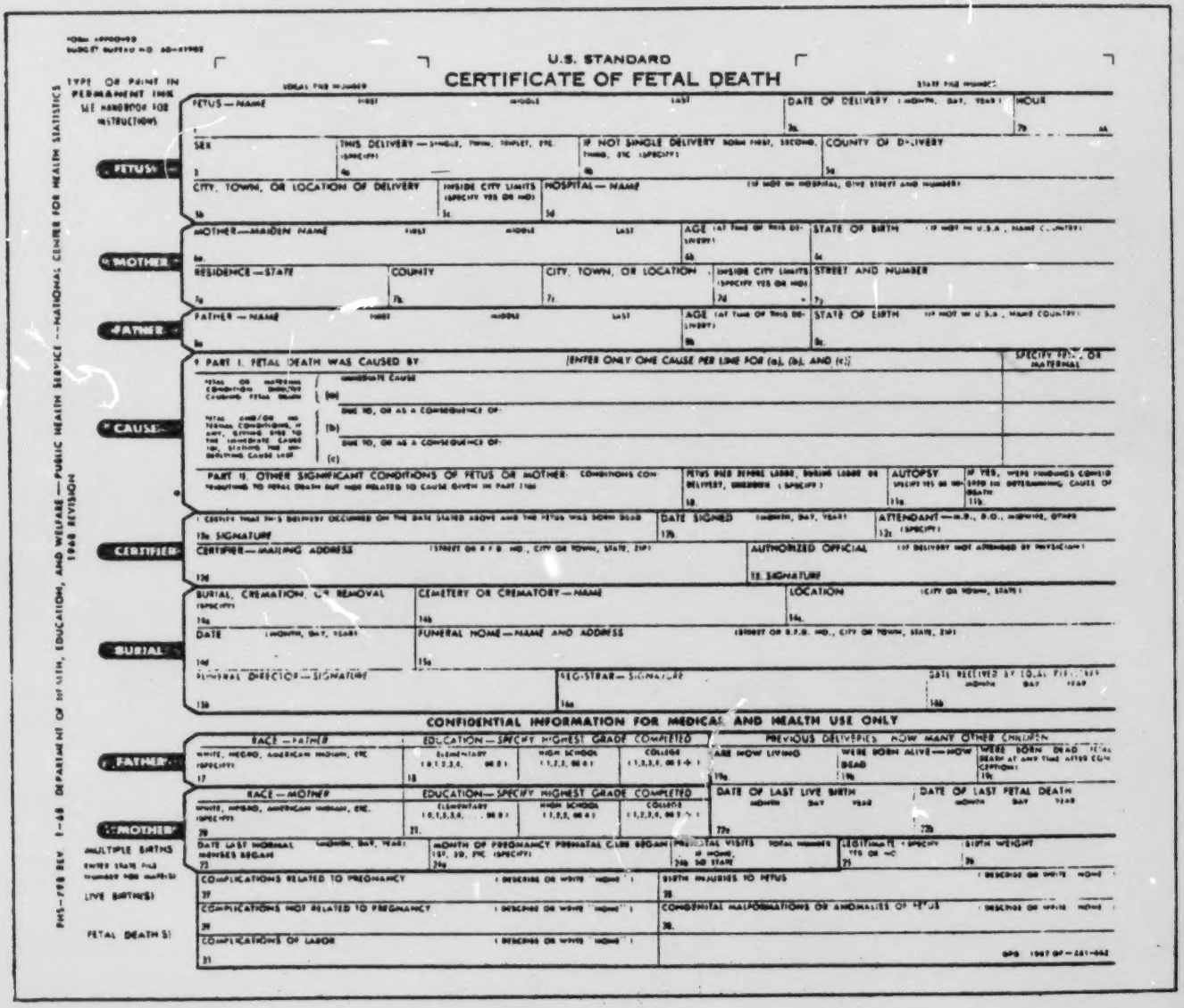
ASSOCIATION WITHIN 6 MONTHS PRIOR TO ONSET OF HEPATITIS:

☐ TRANSFUSION OF BLOOD; BLOOD PRODUCTS ☐ PARENTERAL INJECTION OF DRUGS ☐ ADMITTED ☐ SUSPECTED ☐ TATTOO ☐ NONE ☐ UNKNOWN

HEPATITIS B ANTIGEN TEST: ☐ YES ☐ NO DATE _____ ☐ POS ☐ NEG

REMARKS:

Figure 6-B

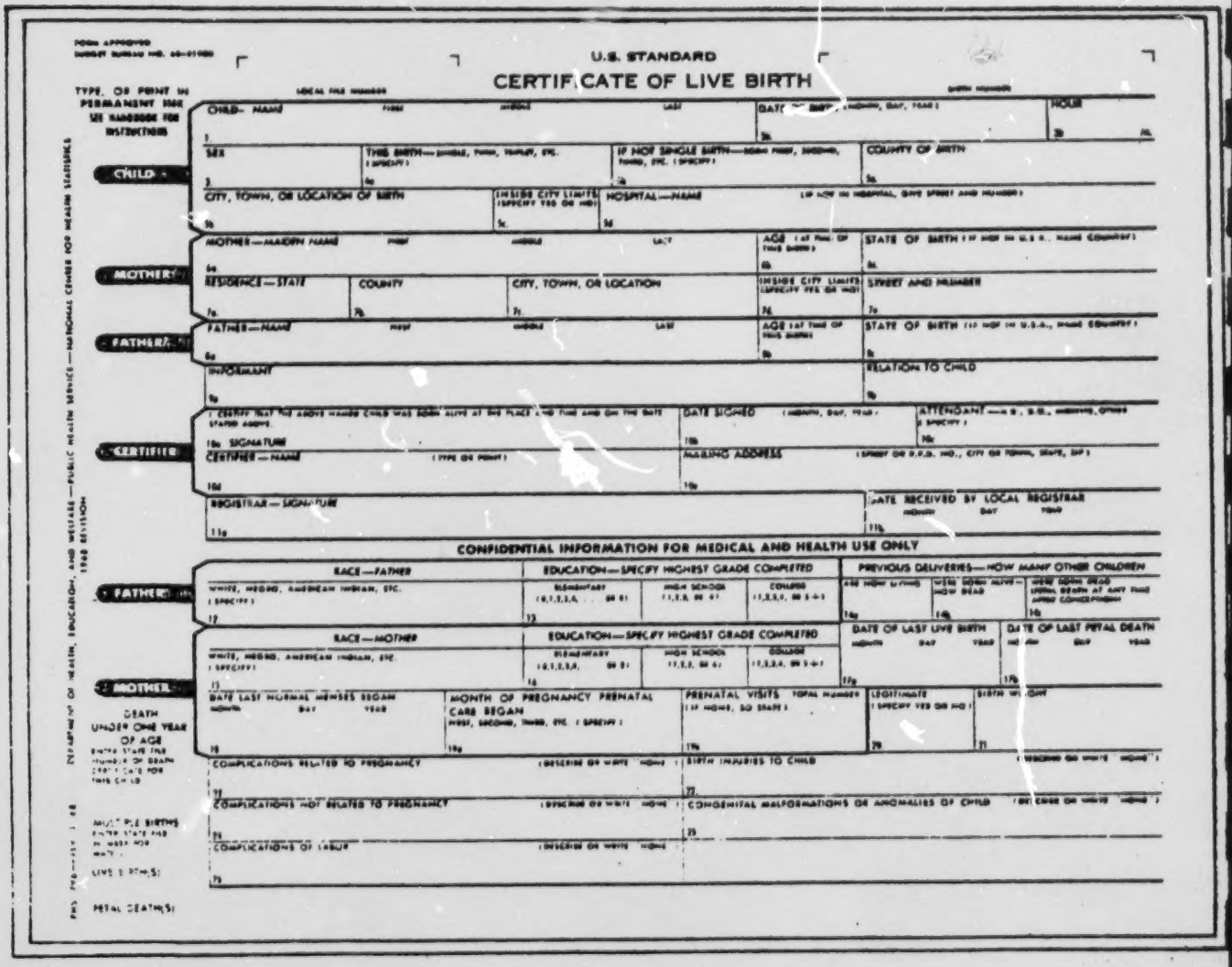


U.S. STANDARD

CERTIFICATE OF FETAL DEATH

SOURCE: Vital Statistics of the United States, 1972. Volume II - Mortality. Washington, D.C.: National Center for Health Statistics, 1977

Figure 3-A



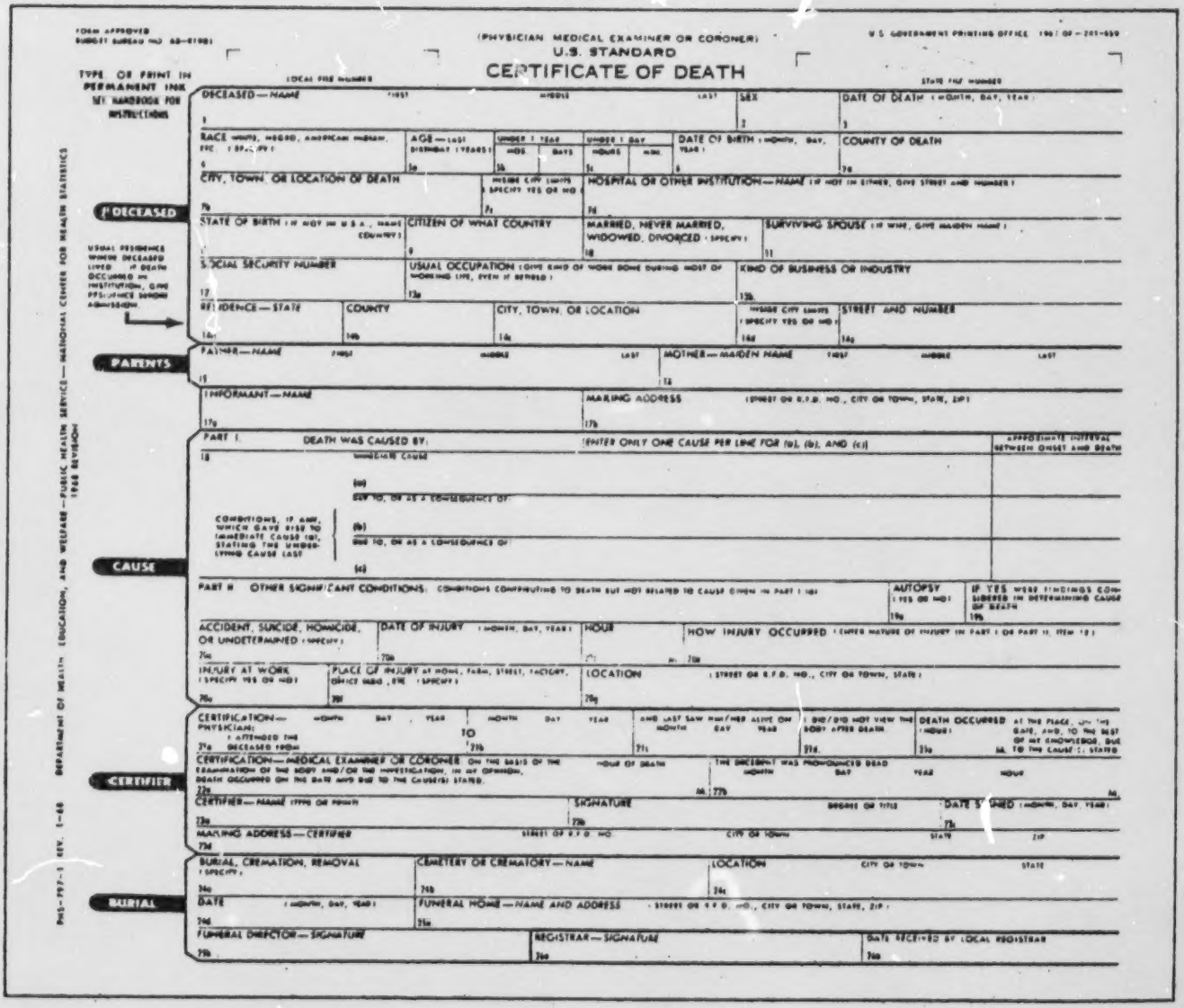
U.S. STANDARD

CERTIFICATE OF LIVE BIRTH

CONFIDENTIAL INFORMATION FOR MEDICAL AND HEALTH USE ONLY

SOURCE: Vital Statistics of the United States, 1972. Volume I - Natality. Washington, D.C.: National Center for Health Statistics, 1977.

Figure 6-A



(PHYSICIAN, MEDICAL EXAMINER OR CORONER)

U.S. STANDARD

CERTIFICATE OF DEATH

TYPE OR PRINT IN PERMANENT INK. SEE HANDBOOK FOR INSTRUCTIONS

DECEASED — NAME (First, Middle, Last) | SEX | DATE OF DEATH (Month, Day, Year)

RACE (White, Negro, American Indian, etc. (Specify)) | AGE — Last Birthday (Years) | Under 1 Year (Months, Days) | Under 1 Day (Hours, Min.) | DATE OF BIRTH (Month, Day, Year) | COUNTY OF DEATH

CITY, TOWN, OR LOCATION OF DEATH | INSIDE CITY LIMITS (Specify Yes or No) | HOSPITAL OR OTHER INSTITUTION — NAME (If not in either, give street and number)

DECEASED

STATE OF BIRTH (If not in U.S.A., name country) | CITIZEN OF WHAT COUNTRY | MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) | SURVIVING SPOUSE (If wife, give maiden name)

SOCIAL SECURITY NUMBER | USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) | KIND OF BUSINESS OR INDUSTRY

Usual residence (Where deceased lived. If death occurred in institution, give residence before admission.)

RESIDENCE — STATE | COUNTY | CITY, TOWN, OR LOCATION | INSIDE CITY LIMITS (Specify Yes or No) | STREET AND NUMBER

PARENTS

FATHER — NAME (First, Middle, Last) | MOTHER — MAIDEN NAME (First, Middle, Last)

INFORMANT — NAME | MAILING ADDRESS (Street or R.F.D. No., City or Town, State, ZIP)

CAUSE

PART I. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).) | Approximate interval between onset and death

(a) Immediate cause

(b) Due to, or as a consequence of

Conditions, if any, which gave rise to immediate cause (a), stating the underlying cause last

(c) Due to, or as a consequence of

PART II. OTHER SIGNIFICANT CONDITIONS. Conditions contributing to death but not related to cause given in Part I (a) | AUTOPSY (Yes or No) | If yes were findings considered in determining cause of death

ACCIDENT, SUICIDE, HOMICIDE, OR UNDETERMINED (Specify) | DATE OF INJURY (Month, Day, Year) | HOUR | HOW INJURY OCCURRED (Enter nature of injury in Part I or Part II, Item 18.)

INJURY AT WORK (Specify Yes or No) | PLACE OF INJURY (At home, farm, street, factory, office bldg., etc. (Specify)) | LOCATION (Street or R.F.D. No., City or Town, State)

CERTIFIER

CERTIFICATION — PHYSICIAN: I ATTENDED THE DECEASED (Month, Day, Year) TO (Month, Day, Year) | AND LAST SAW HIM/HER ALIVE ON (Month, Day, Year) | I DID/DID NOT VIEW THE BODY AFTER DEATH | DEATH OCCURRED (Hour) | At the place, and the date, and, to the best of my knowledge, due to the cause(s) stated.

CERTIFICATION — MEDICAL EXAMINER OR CORONER: On the basis of the examination of the body and/or the investigation, in my opinion, death occurred on the date and due to the cause(s) stated. | THE DECEDENT WAS PRONOUNCED DEAD (Month, Day, Year, Hour)

CERTIFIER — NAME (Type or Print) | SIGNATURE | DEGREE OR TITLE | DATE SIGNED (Month, Day, Year)

MAILING ADDRESS — CERTIFIER (Street or R.F.D. No., City or Town, State, ZIP)

BURIAL

BURIAL, CREMATION, REMOVAL (Specify) | CEMETERY OR CREMATORY — NAME | LOCATION (City or Town, State)

DATE (Month, Day, Year) | FUNERAL HOME — NAME AND ADDRESS (Street or R.F.D. No., City or Town, State, ZIP)

FUNERAL DIRECTOR — SIGNATURE | REGISTRAR — SIGNATURE | DATE RECEIVED BY LOCAL REGISTRAR

PHS-797-1 REV. 5-68 DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE — PUBLIC HEALTH SERVICE — NATIONAL CENTER FOR HEALTH STATISTICS — 1968 REVISION

SOURCE: Vital Statistics of the United States, 1972. Volume II - Mortality. Washington, D.C.: National Center for Health Statistics, 1977.

D. Agencies

Center for Disease Control (CDC)

Established as an operating health agency of the Public Health Service on July 1, 1973 by the Secretary of HEW, the Center for Disease Control is the "Federal agency charged with protecting the public health of the nation by providing leadership and direction in the prevention and control of diseases and other preventable conditions."[6] Its major divisions are: National Institute for Occupational Safety and Health, Bureau of Epidemiology, Bureau of Health Education, Bureau of Laboratories, Bureau of Smallpox Eradication, Bureau of State Services, Bureau of Training, and Bureau of Tropical Diseases.

CDC administers national programs for the control of such conditions as childhood lead-based paint poisoning and urban rats. Other activities under the Center's jurisdiction include the enforcement of foreign quarantine regulations; the provision of guidance in the quality control of clinical laboratories, along with the evaluation and licensure of same involved in interstate commerce; and the administration of a national program on the subject of smoking and health research, information and education. Not to be forgotten is the Center's National Institute for Occupational Safety and Health's (NIOSH) efforts through research and development of occupational safety and health standards to assure the nation's working people of hazard-free work environments.

CDC's international involvements include participation in national and international agencies concerned with the eradication or control of communicable diseases and other preventable conditions.

The statistical responsibilities of CDC deal with the national surveillance of all diseases and conditions within its jurisdiction. This requires the publication of weekly reports on morbidity and mortality from infectious diseases. Surveillance data on the prevalence and incidence of specific diseases or preventable health conditions are issued periodically. (See Part F of this section for listing.)

National Center for Health Statistics (NCHS)

NCHS, part of the Health Resources Administration of the Public Health Service, Department of HEW, "Designs and maintains national data collection systems, conducts research in statistical survey methodology, and cooperates with other agencies in activities to increase the availability and usefulness of health data. Available data include statistics on

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[6] Statistical Services of the United States Government. Revised edition. Washington, D.C.: Executive Office of the President, Office of Management and Budget, 1975. (p. 175)

births, deaths, marriages, and divorces; annual and decennial life tables and related actuarial tables; statistics on illness, injury, impairments, disability, and costs, and utilization of health services, including hospitals and nursing homes; statistics on nutritional status, prevalence of chronic diseases, physiological measurements and patterns of physical and intellectual growth; statistics on the characteristics, supply, and geographic distribution of health manpower and facilities.[7]

World Health Organization (WHO)

Established in 1948 as an agency of the United Nations, the World Health Organization functions mainly to assist governments in assuring the health of their people. This involves assistance with national health services programs, efforts towards the elimination of epidemic and endemic diseases, the maintenance of epidemiological and statistical programs, the promotion of maternal and child health services and of improvement in nutrition, housing, sanitation and working conditions, and contributions to the advancement of health professional groups. to name a few of WHO's endeavors. Formal agreements between WHO and Pan American Health Organization (PAHO), the International Labour Organization (ILO), the Food and Agriculture Organization of the United Nations (FAO), the United Nation's Educational, Scientific and Cultural Organization (UNESCO), and the International Atomic Energy Agency (IAEA) have been made to help with these efforts. WHO consists of six regional organizations: Eastern Mediterranean Region (Alexandria), African Region (Brazzaville), European Region (Copenhagen), Western Pacific Region (Manila), South-East Asia Region (New Delhi), Region of the Americas (Washington, D.C.).[7]

The publication program of WHO consists of periodicals, technical books and procedures, reference works, reports of advisory groups directed at audiences ranging from the lay public to the health professional and researcher. Statistical publications include the Weekly Epidemiological Record, World Health Statistics Report and the World Health Statistics Annual. (See Section F, International Level.)

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[7]United States Government Organizational Manual, 1976/77. Washington, D.C.: General Services Administration, National Archives and Records Service, Office of the Federal Register, 1976.

[8]World Health Organization. Introducing WHO. Geneva: WHO, 1976.

E. Useful Guides to the Major Publication Series

1. U.S. National Center for Health Statistics.
Current listing and topical index to the Vital and Health Statistics series, 1962-76. Rockville, Md., 1976. (DHEW publication no. HRA 77-1301 [rev.])

This publication is an index to health topics covered in the Vital and Health Statistics series and an index to the presentation of data according to demographic and socioeconomic variables. It is in two sections, with some overlapping. Section 1 includes topics and variables related to the health status of people. Section 2 covers characteristics of health facilities and manpower. Index is updated periodically.

2. U.S. National Center for Health Statistics.
Catalogue of publications, 1962-71. Rockville, Md., 1973. (DHEW publication no. HRA 74-1300)

_____. 1972 supplement. Rockville, Md., 1973. (DHEW publication no. HSM 73-1306)

_____. 1973 supplement. Rockville, Md., 1974. (DHEW publication no. HRA 74-1307)

Complete listing and brief description of the publications issued by NCHS, grouped by 15 broad subject categories. The majority of the publications in the Catalogue are part of the Center's Vital and Health Statistics series.

3. U.S. National Center for Health Statistics.
Facts at Your Fingertips: A Guide to Sources of Statistical Information on Major Health Topics. 1977.

This new guide lists major sources of statistical information on some major health topics.

Under each topic the NCHS publications are cited first, followed by other HEW sources, other federal agencies, and by private organizations or associations.

Very useful for chronic disease statistics as well as other health topics.

4. U.S. Department of Health Education and Welfare.
Publications Catalog. Washington, D.C.: U.S. Government Printing Office, 1978.

Cumulative catalog covering July, 1976 - December, 1977. Uses Anglo-American Cataloging rules and Library of Congress main entries. Format is like that of the Monthly Catalog of Government Publications with text and five indexes: author, title, subject, series/report number, and Superintendent of Documents Classification number.

F. BIBLIOGRAPHY OF STATISTICAL SOURCES

National Level

1. Great Britain Department of Health and Social Security.
Digest of health statistics for England and Wales. 1969-71. Continued by Reference no. 3.

2. Great Britain Department of Health and Social Security.
Reports on health and social subjects. no.1- , London 1972- .

3. Great Britain Department of Health and Social Security.
Health and personal social services statistics for England and Wales. 1972- .

4. Grove, Robert D.
Vital statistics rates in the United States, 1940-1960. Washington, U.S. National Center for Health Statistics. 1968. (Public Health Service publication no. 1677). Update of Reference no. 6.

5. U.S. Bureau of the Census.
Mortality statistics, 1900-1936. Washington, U.S. Govt. Print. Off., 1906-1937. Continued by Reference no. 22.

6. U.S. Bureau of the Census.
...Vital statistics rates in the United States, 1900-1940, by E. Lindner ...and Robert D. Grove...Washington, 1943.

Purpose is to "bring together and summarize past time trends and the present status of important mortality and natality rates." The work was intended as an essential aid and guide for health administrators and social analysts.

7. U.S. Bureau of the Census.
Vital Statistics - Special Reports, 1936-59.

Scope of reports covers trend analyses over period of years, special data on unusual causes of death, tabulations on residence and population. Replaced by U.S. National Health Survey. Health Statistics, Series A-D, Reference no. 18.

8. U.S. Center for Disease Control.
Botulism in the United States, 1899-1973.

Reviews the epidemiology of botulism in the U.S. since 1899, the problems of clinical and laboratory diagnosis, and current concepts of treatment.

9. U.S. Center for Disease Control.
Morbidity and mortality, weekly report. v.1, 1952- .

Supersedes National Office of Vital Statistics' weekly mortality index. Statistical summary for U.S. and world of various diseases such as malaria and smallpox. Also cases of specified notifiable diseases for each week for U.S. and each state. Final issue each year is annual supplement: Reported incidence of notifiable diseases. Summarizes the year with final figures. Includes graphs and figures for the last ten years.

10. U.S. Center for Disease Control.
1972-73 tuberculosis statistics: states and cities.

A summary of 1973 TB case data for states and cities and TB death data for 1970.

11. U.S. Center for Disease Control.
Surveillance reports on:

Family Planning Services
Foodborne Outbreaks
Hepatitis
Influenza - Respiratory Disease
Leptospirosis
Malaria
Measles
Mumps
Mycoses
National Nosocomial Infections Study
Neurotropic Viral Disease - Annual
Encephalitis Summary
Nutrition
Occupational Health and Safety
Primate Zoonoses
Psittacosis
Rabies
Rh Hemolytic Disease
Salmonella
Shigella
Smoking and Health
Trichinosis Surveillance
Zoonoses

These reports are a summary of information received from state health departments, and sometimes from university investigators, virology laboratories and "other pertinent sources." Much of the information is preliminary. It is intended primarily for the use of those with responsibility for disease control activities. Annual issues although some are quarterly with annual cumulations.

12. U.S. Indian Health Service.
Illness among Indians, 1965-69.

Summarizes notifiable disease data for five years. Includes a brief description of demographic characteristics of Indian and Alaska native populations.

13. U.S. Indian Health Service.
Indian health trends and services, 1974 ed.

Extensive data in the form of charts and tables presenting vital and health statistics of Indians.

14. U.S. Indian Health Service.
Indian vital statistics, 1969.

Tabulations prepared by the Health Program Systems of IHS. Source for data is from copies of birth certificates of state health departments.

15. U.S. National Center for Health Statistics.
Catalogue of publications, 1962-71. Rockville, Md., 1973. (DHEW publication no. HRA 74-1300, reissued as HRA 76-1300)

_____. 1972 supplement. Rockville, Md., 1973. (DHEW publication no. HMS 73-1306)

_____. 1973 supplement. Rockville, Md., 1974. (DHEW publication no. HRA 74-1307)

Complete listing and brief description of the publications issued by NCHS, grouped by 15 broad subject categories. The majority of the publications in the Catalogue are part of the Center's Vital and Health Statistics series (Reference no. 20).

16. U.S. National Center for Health Statistics.
Current listing and topical index to the Vital and Health Statistics series, 1962-76. Rockville, Md., 1977. (DHEW publication no. HRA 77-1301).

This publication is an index to health topics covered in the Vital and Health Statistics series and an index to the presentation of data according to demographic and socioeconomic variables. It is in two sections, with some overlapping. Section 1 includes topics and variables related to the health status of people. Section 2 covered characteristics of health facilities and manpower. Index is updated periodically.

17. U.S. National Center for Health Statistics.
Facts of life and death. Rockville, Md., 1974. (DHEW publication no. HRA 74-1222)

"Statistics in this report have been assembled...to answer questions frequently asked about vital and health statistics for the United States."

Useful collection of data. User is referred to primary sources for further information.

18. U.S. National Health Survey.
Health statistics. Washington, 1958-63.

Series A: Program descriptions, survey designs, concepts and definitions. 4 nos. 1958-62. (Public Health Service publication no. 584-A)

Series B: Health interview survey results by topic. 42 nos. 1958-63. (Public Health Service publication no. 584-B)

Series C: Health interview survey results for population groups. 7 nos. 1959-62. (Public Health Service publication no. 584-C)

Series D: Development and evaluation reports. 8 nos. 1960-63. (Public Health Service publication no. 584-D)

Superseded by Reference no. 20.

19. U.S. National Center for Health Statistics.
Monthly vital statistics report. v.1- , 1952- .

Data is collated for annual publication Vital Statistics of the United States (Reference no. 22).

Provisional statistics on births, marriages, divorces, and deaths. Tables give data for each month and then same month a year ago, with cumulative totals for each of three years. Time lag is about 13 weeks for mortality data and 8 weeks for other data.

20. U.S. National Center for Health Statistics.
Vital and health statistics. Washington, 1963- . (Rainbow Series)

Data covered by the surveys and studies of the National Center for Health Statistics are compiled and published in this series. The publications are grouped into the following subseries:

Series 1: Programs and collection procedures. 1963- , no. 1- .
Reports which describe the general programs of the National Center for Health Statistics.

Series 2: Data evaluation and methods research. 1963- , no. 1- .
Studies of new statistical methodology including: experimental tests of new survey methods, studies of vital statistics collection methods.

Series 3: Analytical studies. 1964- , no. 1- .

Comprises reports presenting analytical or interpretive studies based on vital and health statistics.

Series 4: Documents and committee reports. 1965- , no. 1- .

Final reports of major committees concerned with vital and health statistics.

Series 10: Data from the Health interview survey. 1968- , no. 1- .

Statistics on illness, accidental injuries, disability, use of hospitals, medical, dental, and other services, based on data collected in national household interview survey.

Series 11: Data from the health examination survey. 1964- , no. 1- .

No. 1- (1964-) Relate to adult programs.
No. 101- (1970-) Relate to children and youth.

Series 12: Data from the Health records survey. 1965- , no. 1- .

Reports on the health characteristics of persons in institutions, and on hospital, medical nursing, and personal care received. Discontinued after 1975. Future reports from these surveys will be in Series 13.

Series 13: Data on Health resources utilization. 1966- , no. 1- .

Statistics relating to discharged patients in short-stay hospitals, based on a sample of patient records in a national sample of hospitals.

Series 14: Data on Health resources: Manpower and Facilities. 1968- , no. 1- .

Statistics on the numbers, geographic distribution, and characteristics of health resources including physicians, dentists, nurses, other health manpower occupations, hospitals, nursing homes, and outpatient and other inpatient facilities.

Series 20: Mortality data. 1965- , no. 1- .

Various special reports on mortality giving data on other than that in the annual volume of Vital Statistics Reports. Covers tabulations by cause of death, age, data for geographic areas.

Series 21: Natality Data. 1964- , no. 1- .

Data on birth by age of mother, birth order, geographic areas, states, cities, time series of rates.

Series 22: Data from the National natality and mortality surveys. 1961- , no. 1- .

Discontinued. Future reports will be included in Series 20 and 21.

Series 23: Data from the National survey of family growth.

21. U.S. National Center for Health Statistics.
Vital statistics--special reports. v.1-54, 1934-59. Washington, 1936-1965.

Superseded by its Vital and health statistics, Reference no. 20.

22. U.S. National Center for Health Statistics.
Vital statistics of the United States. Washington. 1937- .

v.1: Natality v.2: Mortality v.3: Marriage and divorce

Continuation of Birth, stillbirth and infant mortality statistics and Mortality statistics of the Bureau of the Census.

Annual collation of Reference no. 19. Official final detailed data. Several years old by time of publication.

Definitive publication of the vital statistics, containing extensive basic data and analysis on marriage, divorce, natality, fetal mortality, and mortality.

23. U.S. National Center for Health Statistics
United States Life Tables: 1969-71. Vol. 1- , No. 1- .

The life tables in this report are current life tables for the U.S. based on age-specific mortality rates for 1969-71.

24. U.S. National Center for Health Statistics.
Vital Statistics Advance Data. No. 1- . October 18, 1976- .

Each issue contains selected findings from health and demographic surveys conducted by NCHS.

It provides a means for early release of data previously issued as supplements to the Monthly Vital Statistics Report. MSUR Supplements with provisional and final vital statistics will still be published.

International Level

1. Mortality for selected causes in 30 countries (1950-1961).
Age-adjusted death rates and age-specific death rates, by Mitsuo Segi [and others]. Tokyo, Kosei Tokei Kyokai, 1966.

Twenty cases of death are included, with statistical detail for 30 countries. The diseases included are those frequently asked for, such as heart disease, tuberculosis, neoplasms, accidents, and suicides.

2. Preston, Samuel H.
Causes of death; life tables for national populations. N.Y., Seminar Press, 1972.

"Presents data on mortality from recorded causes of death in 180 populations, with detail provided on age and sex.

3. Quimby, Freeman H.
Leading causes of death in selected areas of the world. Prepared for the Special Subcommittee on International Health, Education, and Labor Programs ...Washington, U.S. Govt. Print. Off., 1972.

4. United Nations. Statistical Office.
Demographic yearbook. N.Y., 1948- .

World population, births, deaths, life tables, marriages, and divorces. There are no data on morbidity. Each edition is also devoted to a "special topic" such as natality or mortality, and includes in-depth coverage and trends over forty-five years or more. The index is cumulative, covering all editions.

5. United Nations. Statistical Office.
Population and vital statistics reports. January, 1949- . N.Y., (Statistical papers. Series A)

6. World Health Organization.
...Weekly epidemiological record. v.5, 1930- .

Issued by League of Nations Health Organization, 1930-49. First four years (1926-29) were circulated only to certain public health officers.

Prepared for the guidance of health administrators and health authorities. Contains notifications of diseases made under the International Health Regulations. Also contains epidemiological notes on communicable diseases of international importance.

World Health Organization.
World health statistics report. v.1. 1947- . (Monthly)

Contains morbidity and mortality statistics on worldwide scales; special statistical compilations are included in each issue.

7. World Health Statistics Annual. Geneva, 1939- .

Title varies. Annual epidemiological and vital statistics (1939-1962). Supersedes League of Nations. Health Organization. Annual epidemiological report. Consists of 3 parts: v.1: Vital statistics and causes of death, v.2: Infectious diseases and v.3: Health personnel and health establishments. Data is often two or three years late in publication.

State and Local--Selected Examples

1. California. Department of Health.
   Communicable diseases. Berkeley, 1962- . Annual, title varies.

2. California. Department of Public Health.
   California public health statistical report. Berkeley, 1952-61.

   Continues the Statistical supplement to Department of Public Health Report (annual), 1947/48-1951/52. Issued in several parts: Vital statistics, tuberculosis, communicable diseases, crippled children services, laboratories. Superseded by nos. 1, 3, and 4.

3. California. Department of Public Health.
   California public health statistical report; crippled children services. Berkeley, 1962/63- .

4. California. Department of Public Health.
   Vital statistics of California. Berkeley, 1962- .

   Title varies. Latest report available is a combined edition for 1972, 1973 and 1974.

5. California Morbidity. 1923- .

   Title varies. Weekly reports of selected notifiable diseases which have occurred in the state. It includes comparable statistics for the previous year and cumulative statistics.

6. Chicago. Board of Health.
   Live births by age of mother, attendance, sex-race, and legitimacy for each community area. 1970-1974.

   This was made available through the Illinois Department of Public Health. Computer print-out format. Annual.

7. Chicago. Board of Health.
   Provisional health statistics data, weekly report. 9/19/74- .

   Weekly compilation of reportable illnesses and leading causes of death in Chicago.

8. Chicago. Board of Health.
   Resident deaths by sex-race, and 5-year age groups within community areas, 1970-74.

9. Illinois. Department of Public Health.
Vital statistics - special reports, 1963.

Each issue covers a different topic giving statistics by city or county for such things as marriage, natality, infant mortality. Issued irregularly.

10. Illinois. Department of Public Health.
Vital statistics, 1950- . Annual

Natality and mortality by state, county, city, age, race and sex. Includes statistics on venereal disease and deaths by accidents, homicide and suicide.

11. Illinois. Department of Public Health.
Weekly reports, 1973, No. 45- , 1975, No. 13.

Morbidity statistics for Illinois, cities and counties for each week.

12. Illinois. Department of Public Health.
Monthly report. April 1975- .

Supersedes the Weekly report.

13. Los Angeles County Health Department.
Morbidity and mortality; reportable diseases, County of Los Angeles. 1966- .

14. Schoen, Robert.
Mortality by cause; life tables for California 1950-70. [Berkeley] Demographic Analysis Section, California Department of Public Health, 1973.

III. Statistical Sources for Chronic Conditions and Special Health Problems

A. Problems in Collection

With the decrease of acute diseases as causes of sickness and death the importance of chronic and degenerative diseases is increasing. This is partly due to the conquest of many communicable diseases and the greater number of people living to older ages.

Problems in collecting statistics about chronic conditions are due to there not being a reliable, comprehensive method. In general, prevalence data is easier to obtain than incidence data for these conditions. For example, it would be difficult to determine the incidence of alcoholism, while a survey could shed some light on its prevalence.

Generally, since there is no reporting system for most of these conditions (cancer registries being an exception) one must rely on health surveys or on sampling studies.

B. Agencies and Organizations

National Institutes of Health

The National Institutes of Health (NIH) is the main Federal agency for biomedical research concerning the prevention, diagnosis, and treatment of disease. To fulfill their objectives a wide variety of data is needed. Data on the incidence, prevalence, and cost of disease in the country is collected for the efficient use of funds for research. Epidemiological data is also gathered to aid in the testing of hypotheses in the search for the etiology and pathogenesis of diseases.[1]

The National Institutes of Health comprise the following units:

National Institute of Aging (formed in 1974) to head research in the biomedical, behavioral and other aspects of aging.

National Institute of Allergy and Infectious Diseases (established in 1955) performs research on all infectious diseases but particularly those of the immune system.

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[1]U.S. Department of Health, Education and Welfare. Health Statistics Plan, Fiscal Years 1978-82, p. 9-10.

National Institute of Arthritis, Metabolism and Digestive Diseases (established in 1950) is responsible for research in the areas of arthritis, metabolic diseases, endocrine abnormalities, nutrition and digestive diseases, to name a few.

National Cancer Institute (established in 1935) seeks to find the causes, methods of prevention, detection and treatment for the various forms of cancer. It is probably the best known Institute.

National Institute of Child Health and Human Development (established in 1963) focuses on the early phase of human life, including, but not limited to, fertility, child abuse and neglect, sudden infant death syndromes and other aspects of child and maternal health.

National Institute of Dental Research (established in 1948) focuses its research on the causes and control of facial-oral diseases.

National Institute of Environmental Health Sciences (established in 1966) concerns itself with the health effects of chemical, physical, and biological environmental agents.

National Eye Institute (established in 1968) studies problems within the visual system.

National Institute of General Medical Sciences (established in 1963) applies basic research to its mission of understanding molecular, cellular, genetic, and environmental factors in human health and disease.

National Heart, Lung and Blood Institute (established in 1948) is responsible for research into cardiovascular and respiratory problems.

National Institute of Neurological and Communicative Disorders and Stroke (established in 1950) studies the disease entities in its title in addition to nervous system trauma and the fundamental neurosciences.

Alcohol, Drug Abuse and Mental Health Administration (ADAMHA) is composed of three agencies: (1) National Institute of Mental Health (NIMH); (2) National Institute of Alcohol Abuse and Alcoholism (NIAAA); and (3) National Institute of Drug Abuse (NIDA). Each agency conducts statistical activities aimed at identifying the location and characteristics of facilities; at counting the numbers and characteristics of persons served; at determining charges and sources of payment

for services and at assessing the effectiveness of services provided.[2] Each agency also has an Information Clearinghouse for dissemination of information. (See Section VIII for mailing addresses.)

National Safety Council

The main objective of the National Safety Council is "to reduce the number and severity of all kinds of accidents, by gathering and distributing information about the causes of accidents and ways to prevent them."[3] The Council compiles statistics received from governmental agencies, insurance companies, industries, schools, trade and labor organizations, etc.

Note:

Other private or voluntary health organizations which collect and disseminate statistics on chronic diseases are listed in Facts at Your Fingertips under the appropriate disease.

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[2] Ibid, p. 7-8

[3] Encyclopedia of Associations, Volume 1: National Organizations of the U.S. 11th ed. Detroit: Gale Research Co., 1977, item 7647.

C. Bibliography of Statistical Sources for Chronic Conditions and Special Health Problems

SOURCES OF A GENERAL NATURE:

1. U.S. National Center for Health Statistics.
   Vital and Health Statistics. Washington, D.C.

   Series 10: Data from the Health Interview Survey
   Series 11: Data from the Health Examination Survey
   Series 12: Data from the Health Records Survey
   Series 13: Data on Health Resources Utilization

2. U.S. National Center for Health Statistics.
   Health in the Later Years of Life - Selected Data from the National Center for Health Statistics. Washington, D.C.: U.S. Government Printing Office, October 1971.

   This pamphlet includes charts on three areas. First, there are life and death tables such as mortality and life expectancy, major causes of death, and divorce rates. Second, there are health problems and their impact such as chronic conditions, acute conditions, activity limitation and disability. Third, use of health services such as physician and dentist visits, hospital and nursing home care and care at home are included.

3. U.S. Administration on Aging.
   Statistical Reports on Older Americans. No. 1- , 1977- .

   These reports replace Facts and Figures of Older Americans. Series of reports on the socioeconomic conditions of the elderly, including income levels, employment, living arrangements, health care, and population trends. Data are from census reports and other publications.

4. Metropolitan Life Insurance Company, New York.
   Statistical Bulletin. v. 1- , 1920- .

   Each issue has special topic. Is indexed in Index Medicus.

5. National Health Education Committee.
   Facts on the major killing and crippling diseases in the United States today. N.Y.: 1955- .

   The latest available edition is 1976. The fact sheets on 15 major diseases include bibliographies. Charts are included for vital statistics, life expectancy, civilian income and expenditures, and allocations of voluntary health agencies to medical research.

SOURCES ON ABORTION:

1. Center for Disease Control. Atlanta, Ga.,
   Abortion Surveillance, Annual Summary, 1972- . Report on legal abortions reported by state health departments and hospitals in 24 states. Data by age, race, marital status, type of procedures, weeks of gestation. Former title: Family Planning Evaluation: Legal Abortions.

SOURCES ON ACCIDENTS, INJURIES, AND OCCUPATIONAL SAFETY:

1. National Safety Council. Chicago, Ill.
   Accident facts, 1972- .

   Annual publication which presents a detailed analysis of accidents, including motor vehicle, work, home, and public. Analyses include: costs of accidents, accident deaths vs. other causes of death, trends in accidental death rates. Tables with geographic breakdown included.

2. American Public Health Association.
   Health and work in America: APHA chartbook. Washington, D.C.: Government Printing Office, 1975.

   Compilation of charts on the occupationally related health and safety of U.S. workers prepared by APHA under contract.

3. U.S. Bureau of Labor Statistics.
   Occupational injuries and illnesses by industry, 1974. BLS Bulletin 1932. Washington, D.C.: Government Printing Office, 1976.

   This survey is required by the Occupational Safety and Health Act of 1970. Every work-related illness and those injuries which involve loss of consciousness, require medical treatment, or prevent an employee from carrying out his regularly assigned duties must be recorded.

4. U.S. National Institute for Occupational Safety and Health.
   Occupational mortality in Washington State, 1950-1971. Government Printing Office, 1976.

   Detailed cause of death analysis (160 cases) is published for each of 194 occupational classes. The occupational mortality findings are compared with those of the one other U.S. study, Vital statistics special reports, Vol. 53, No. 3, 1963.

SOURCES ON ALCOHOLISM:

1. Efron, Vera; Keller, Mark; and Guriolo, C.
   Statistics on consumption of alcohol and alcoholism. New Brunswick, N.J.: Rutgers University, 1974.

2. U.S. National Clearinghouse on Alcohol Information.
   Selected publications on statistics and demographic research on alcohol use and abuse.

   Annotated bibliography of demographic studies of alcohol use and abuse. Available free from Clearinghouse.

3. U.S. National Institute on Alcohol Abuse and Alcoholism.
   First special report to the U.S. Congress on alcohol and health. DHEW Publications no. (ADM) 74-68. Washington, D.C.: Government Printing Office, 1974.

   Contains tables throughout the narrative presenting data on: (1) alcohol consumption among teenagers, adults, and older persons (by state, region, 17 foreign countries, and beverage) by sex; (2) economic costs; (3) health effects - statistical correlations between alcohol and disease; (4) traffic accidents. Second special report issued as ADM 75-212 has similar data.

SOURCES ON BLINDNESS:

1. Kahn, H. A. and Moorhead, H. B.
   Statistics on blindness in the model reporting area, 1968-70. DHEW Publication no. (NIH) 73-427. Washington, D.C.: Government Printing Office, 1973.

   The model reporting area consisted of 14 states in which the registered blind were reported. Statistics on blindness by etiology are given as well as by sex, color, and age variables for each state and for the total area. The first MRA statistics covered 1966 and 1968. The program has been discontinued.

SOURCES ON CANCER:

1. Doll, Richard.
   Cancer incidence in five continents. N.Y.: Springer, 1966-70. Two volumes.

   Data contributed for first volume were from the cancer registries in 24 countries; the second volume reports data for 58 populations. The volumes bring together available cancer incidence data in one place and present the data in the same way so that researchers can make whatever comparisons they choose.

2. U.S. National Cancer Institute.
   U.S. cancer mortality by county, 1950-69. (DHEW publication no. NIH 74-615)

   Presents for each county in the U.S. cancer deaths and age-adjusted death rates according to sex and race over a 20-year period.

3. U.S. National Cancer Institute.
Atlas of cancer mortality among U.S. nonwhites, 1950-69. DHEW Publication no. (NIH) 76-1204. Washington, D.C.: Government Printing Office, 1976.

Maps are based on a compilation of cancer deaths and age-adjusted death rates by sex and race. Data for cancer mortality by the five major racial groups: whites, blacks, American Indians, Chinese and Japanese are also presented.

4. U.S. National Cancer Institute.
Atlas of cancer mortality for U.S. counties, 1950-1969.

Atlas shows geographic variation in cancer death rates across the U.S. for 35 anatomic sites of cancer. The Atlas contains maps of 16 common cancer sites on a county-by-county basis. The other 19 sites are by state economic area (SEA).

Maps are followed by survivor tables for each cancer site, listing a percentile ranking of both mortality rates and numbers of deaths.

5. U.S. National Cancer Institute.
Cancer rates and risks. 2nd ed. (DHEW publication no. (NIH) 74-691).

The purpose of this report is to present information on the measurable aspects of cancer. Variations and trends in cancer incidence and mortality are presented, some aspects of diagnosis and treatment, survival rates for diagnosed cancer cases and prospects for future progress are also given.

6. U.S. National Cancer Institute.
Third national cancer survey - advanced three-year report, 1969-71 incidence. 1974. (DHEW publication no. (NIH) 74-637)

The principal goal of this survey is to provide incidence data for the years 1969 through 1971 for seven metropolitan areas and two entire states. The report contains figures for the resident cases of cancer newly diagnosed during the three years.

7. U.S. National Cancer Institute.
Treatment and survival patterns for black and white cancer patients, 1955-1964. 1975. (DHEW publication no. (NIH) 75-712)

This is the first comprehensive report issued by the Biometry Branch of the National Cancer Institute which evaluates the end results of cancer among black and white patients. Data are presented for 28 sites of primary cancer.

8. U.S. National Cancer Institute, End Results Section.
Cancer Patient Survival, Report No. 5- . 1977- .
Washington, D.C.: Government Printing Office, 1977.
Previous title: End Results in Cancer, Report No. 1-4. 1950-1973.

A series of comprehensive reports on the survival of cancer patients. Data is analyzed with respect to age, race, sex, primary site, cell type, extent of disease and treatment. No. 5 provides data for the period 1950-1973 from 453,467 patients. Previous reports provide data from 1940-1950.

SOURCES ON DIABETES:

1. U.S. National Institute of Arthritis, Metabolism and Digestive Diseases.
Diabetes Data. DHEW Publication no. (NIH) 78-1468. Washington, D.C.: U.S. Government Printing Office, 1978.

Compilation of facts ranging from clinical information to the socioeconomic impact of the disease. Statistical scope includes incidence and prevalence data, morbidity of long- and short-term complications, and diabetes mortality.

2. National Commission on Diabetes.
Report to the Congress of the United States. Volume III, Part 1, Scope and Impact of Diabetes. DHEW Publication no. (NIH) 76-1021. Washington, D.C.: Government Printing Office, 1976.

The total report contains four volumes. Volume III, Part 1, covers the reports of the work groups on epidemiology and morbidity. There is extensive data on the incidence and prevalence of diabetes by age, geographic, and sex variables. There is also data on incidence by weight variables and family income.

SOURCES ON DRUG ABUSE:

1. National Institute on Drug Abuse.
DAWN city summaries. 1973- (?)

Annual chartbook on patterns of drug abuse as reported by those emergency rooms in 23 SMSA's participating in the Drug Abuse Warning Network.

2. National Institute on Drug Abuse.
Heroin indicators trend report. DHEW publication no. (ADM) 76-315. Government Printing Office, 1976.

This is an irregular series of reports intended to provide an objective assessment of heroin indicator trend data in this country. The indicators include: (1) medical examiner reports

on drug-related deaths; (2) emergency room reports on drug-related episodes; (3) hepatitis reports; (4) reports on the drug retail price and purity levels; (5) state and local law enforcement reports on drug law arrests; (6) drug abuse treatment program admission records. The reports focus on patterns of heroin use. Sources are discussed and there is a brief bibliography.

3. U.S. National Institute on Drug Abuse.
   NIDA statistical series, 1973- .

   The data presented in the reports describe national patterns of drug abuse and treatment, and the characteristics of the client population for all reporting federally-funded treatment programs.

SOURCES ON HYPERTENSION:

1. U.S. National Heart and Lung Institute.
   The public and high blood pressure, 1973.

   A poll conducted by Harris and Associates, Inc. The survey was to provide information on what the public knows about hypertension, what it does about it, and the effects it has had on the life-style of individuals. Broken into age, sex and race categories.

SOURCES ON MENTAL HEALTH:

1. U.S. National Institute of Mental Health.
   Mental health statistics series.

   Series A: Mental health facilities reports. Descriptive data on facilities, patients served, staffing and expenditures.

   Series B: Analytical and special study reports.

   Series C: Methodology reports. New statistical methodology, data collection techniques, evaluation of data collection techniques.

   Series D: Conference and committee reports. On subject of general interest to the field.

2. U.S. National Institute of Mental Health.
   Statistical notes. 1- , 1969- .

   The purpose of these notes is to provide brief presentations of data dealing with specific topics such as educational level of admissions to state mental hospitals, accessibility of community mental health centers, length of stay in general hospital psychiatric inpatient units. Content usually includes tabular presentations of data and a brief description of the highlights of the data.

SOURCES ON NUTRITION:

1. U.S. Center for Disease Control. Nutrition Program.
   Ten-state nutrition survey, 1968-1970.

   Survey collected five types of data: general demographic, dietary intake, clinical, dental, biochemical, from ten states representative of their geographic region and from New York City.

2. U.S. National Center for Health Statistics.
   Preliminary findings of the first health and nutrition examination survey, United States, 1971-72.

   Presents preliminary findings on the dietary intake and biochemical levels of various nutrients in a probability sample of U.S. population 1-74 years of age, by age, sex, race, and income level, 1971-72.

SOURCES ON PRODUCT INJURY AND POISONING:

1. Consumer Product Safety Commission.
   NEISS News, 1972- .

   Data from the National Electronic Injury Surveillance System. The 119 hospital emergency rooms participating in NEISS comprised a representative sample for the U.S. Data tables are based on the 90 product categories in the Consumer Product Hazard Index.

2. National Clearinghouse for Poison Control Centers. Food and Drug Administration, Rockville, Maryland.
   Poison control statistics, 1968- .

   This annual report is compiled from the reports of individual cases to the Poison Control Centers. Data describe product type and brand, victims' age and symptoms, and circumstances of the incident.

SOURCES ON SMOKING:

1. U.S. Center for Disease Control.
   Chartbook on smoking tobacco, and health. CDC 76-8718. Washington, D. C.: Government Printing Office, 1976.

   In addition to charts and tables on smoking and health, there are tables on cigarettes and the economy.

   See also: Adult use of tobacco-1975, published jointly by the National Clearinghouse for Smoking and Health and the Prevention Branch, National Cancer Institute. Available from CDC.

2. U.S. National Heart and Lung Institute.
   Smoking and general mortality among U.S. veterans, 1954-1969.

   This report describes the general mortality experience as related to tobacco use of almost 300,000 U.S. veterans who held government life insurance policies in 1953 and have been followed for 16 years.

SOURCES ON VENEREAL DISEASE:

1. U.S. Center for Disease Control.
   VD fact sheet, 1943- . Atlanta, Georgia.

   Annual report summarizing the incidence and prevalence of syphilis and gonorrhea and historical trends. Data are collected by CDC from state and local health departments.

IV. STATISTICS FOR HEALTH CARE PLANNING AND ADMINISTRATION

A. Who needs Statistics for Health Planning?

To plan and develop better health services, to deliver those services and to measure their effectiveness requires data on health status, availability and utilization of health manpower, facilities, and on the costs of health services.[1] Therefore, there are many users of this data. These include public and private agencies, organizations and individuals involved in the planning, provision or evaluation of health services and health resources at the national, state and local levels.

Federal agencies who need this data, and who also collect and analyze it, include the Health Resources Administration, the Health Services Administration, Social Security Administration, and others.

Professional organizations who have a need for this data are, for example, the American Medical Association, the American Hospital Association, and the National League for Nursing. These organizations also collect and publish data.

State and local agencies include health, welfare, and human resources departments; state planning agencies; health systems agencies, and voluntary health agencies.

B. Legislation concerning statistics

The National Health Planning and Resources Development Act of 1974 (PL 93-641)* authorizes the establishment and operation of health planning agencies at the local level. The Act establishes health service areas, each having a geographic region appropriate for the planning and development of health services. Each health service area has a health systems agency (HSA) whose responsibility is to improve the health of the residents in the area.[2]

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[1] U.S. National Center for Health Statistics. The Cooperative Health Statistics System: Its Mission and Program. Vital and Health Statistics Series 4, No. 19. Washington, D.C.: Government Printing Office, 1977. p. 1.

[2] Ibid, p. 2.

*Note: For an explanation of the various aspects of PL 93-641, see the publication, Health planning and resources development act of 1974. DHEW publication no. (HRA) 75-14015.

The law also requires that the HSAs gather and analyze data. . However, they are not to duplicate data which have already been collected by other agencies or oranizations. This means the HSA must be aware of what is available. Hence, it is extremely important that libraries acquire and make available the existing data publications to those involved in health planning.

C. Agencies and Organizations

The Cooperative Health Statistics System (CHSS)
The purpose of the CHSS is "to assist state and local health agencies and federal agencies ... to establish and maintain a coordinated and uniform data system to guide decision-making regarding health care in the United States."[3]

When fully developed, the system will "provide national, state, and local agencies and organizations with comparable data on vital events, health manpower and statistics utilization and financing of health services, and related elements."[4] CHSS is a component of the National Center for Health Statistics.

Commission on Professional Hospital Activities (CPHA)
1968 Green Road, Ann Arbor, Michigan 48105.
"Medical information resource center dedicated to the improvement of hospital and medical care. Conducts the Professional Activity Study, the basic component of a family of computerized medical record information systems developed to produce a display of hospital medical practice. Makes special comparative studies on local, state, regional, national and international levels from records of over 130 million hospitalizations.[5]

The National Center for Education Statistics (NCES)
The NCES, part of the Education Division, DHEW, collects and disseminates statistics related to education. The Center coordinates the information gathering activities for education programs and performs special analyses of and disseminates the statistical data gathered.[6]

National Center for Health Statistics (NCHS)
The NCHS maintains a Master Facilities Inventory which includes hospitals, nursing homes, and other in-patient facilities. Data published in Series 14.

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[3] U.S. National Center for Health Statistics. The Cooperative Health Statistics System: Its Mission and Program. Vital and Health Statistics Series 4, No. 19, p. 1.

[4] Ibid, p. 7.

[5] Encyclopedia of Associations, Vol. 1, 1977. Item 8279.

[6] Government Manual, 1977-78, p. 257

The NCHS also conducts the Hospital Discharge Survey, a national sample survey on hospital utilization. Data published in Series 13.

The NCHS conducts the National Ambulatory Medical Care Survey. Expansion of this survey is being considered. Data published in Series 13.

National Health Planning Information Center (NHPIC)

The Center was mandated by the National Health Planning and Resources Development Act of 1974 to facilitate the exchange of information needed for health planning.[7]

The Center acquires, analyzes, and disseminates information on a wide variety of topics. These include health resources, health care costs, utilization of health services, and health education. Much of the information is from state and local agencies.

The Center announces documents in "Weekly Government Abstracts," the series on health planning published by NTIS.

For further information, write or call: NHPIC, P.O. Box 31, Rockville, Maryland 20850. Phone: (301) 881-5075.

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[7]Brochure - The National Health Planning Information Center. (HRA) 76-14500

D. Bibliography of Sources

The following selected bibliography presents publications containing data in the following subject categories:

General Medical Care
Health Manpower
Health Facilities and Utilization
Health Care Financing
Health Education

Some of the publications overlap in subject matter content. They have been placed into the category for which they contain the most data.

GENERAL MEDICAL CARE:

1. American Public Health Association.
   Minority health chart book. Washington, D.C.: U.S. Government Printing Office, 1974.

   Gives a graphic overview of and highlights key facts about several major racial/ethnic minorities in the U.S., particularly health status and needs, utilization of health services, involvement in health resources. Differences in data between these minorities and the white population are shown.

2. Axelrod, S. J.; Donabedian, A; Gentry, D. W.
   Medical care chart book - 6th Edition. Ann Arbor, Michigan: University of Michigan, 1976.

   This book covers a large range of data topics. Data on a national level from sources which are noted in the book are presented for such areas as population characteristics, mortality and morbidity, receipt of care, costs and expenditures, health personnel, facilities, quality of care, tax-supported medical care programs, and medical care insurance.

3. American Nurses' Association.
   Facts about nursing. 1935- . New York.

   This "authoritative source of fundamental nursing statistics" presents data on nurse distribution, nursing education, and the economic status of registered nurses. Similar data are given for allied nursing personnel (LPN's, aides, orderlies). Other data include health facilities and utilization, expenditures for health care, and a summary of vital statistics of the U.S.

4. American Medical Association.
   Reference data on socioeconomic issues of health. 1971- Chicago.

   This report presents 40 tables and 27 charts on general health services topics. Examples of the data included are characteristics of the United States population (age, sex, race), morbidity and mortality, characteristics of the health services delivery system, and financing mechanisms and characteristics. This profile is re-issued every year.

5. U.S. Bureau of the Census.
   Historical statistics of the United States: Colonial times to 1970. Washington, D.C.: Government Printing Office, 1975.

   This volume is designed to bring together historical series of wide general interest and to inform the user where additional data can be found. It is a supplement to the Annual Statistical Abstract of the United States.

   The chapters on Population, and Vital Statistics and Health and Medical Care are excellent in that the sources of the statistics are discussed.

6. Standard Medical Almanac. 1st ed. Chicago: Marquis Academic Media, 1977.

   Provides a comprehensive picture of the health care industry in the United States. Contains narrative as well as statistical data concerning health manpower, income and expenditures, education and licensure, facilities, disease, and the federal government and health.

7. U.S. Congress. Congressional Budget Office.
Health differentials between white and nonwhite Americans. Washington, D.C.: Government Printing Office, 1977.

Data for this study was drawn from various sources including unpublished data from NCHS Health Interim Survey. Tables present data on selected measures of health status, trends in health status, and utilization of health services, all by race.

8. U.S. Congress. House Committee on Ways and Means.
National health insurance resource book. Rev. ed. Washington, D.C.: Government Printing Office, 1976.

This is an extensive collection of statistics concerning the health care field. Information includes health services and facilities, health manpower, health insurance, patients, delivery systems of other nations.

9. U.S. Health Resources Administration.
Health: United States, 1975- DHEW publication no. (HRA) 76-1232. Washington, D.C.: Government Printing Office, 1976. Annual.

This publication consists of reports to the Congress required by the Public Health Service Act. It is an overview of the nation's health and health care system.

The huge volume is divided into several sections. Part A covers financial aspects of the nation's health care. Part B covers health resources, while Parts C and D cover health status and the use of health services.

10. U.S. Office of Management and Budget. Statistical Policy Division.
Social indicators, 1976. Washington, D.C.: Government Printing Office, 1977.

Collection of statistics to describe social conditions and trends in the U.S. Eight major social areas are examined, of which health is the first. The three concerns examined are life expectancy, disability and access to medical care. Other areas covered are public safety, education, employment, income, housing, leisure and recreation, and population.

HEALTH MANPOWER:

1. Altenfelder, Marion.
Minorities and women in the health fields; applicants, students, and workers. DHEW publication no. (HRA) 76-22. Health Manpower References. Washington, D.C.: Government Printing Office, 1976.

Report is divided into two parts. The first part contains tables with information by racial/ethnic category, while the second part contains tables with information by sex. Each part has data for health occupations for which data are available. These are: medicine, osteopathic medicine, dentistry, optometry, pharmacy, podiatry, veterinary medicine, nursing, allied health, public health (Part II only).

2. Altenfelder, Marion E.
   Osteopathic physicians in the United States; a report on a 1971 survey. DHEW publication no. (HRA) 75-60. Health Manpower References. U.S. Bureau of Health Resources Development, 1975.

   Tables present data about osteopathic physicians by age, sex, year of graduation, federal and non-federal, by specialty, for both the U.S. and individual states.

3. Arnoff, Franklyn N., and A. H. Kumbor.
   The nation's psychiatrists - 1970 survey. Washington, D.C.: American Psychiatric Association, 1973.

   Third report in a series of manpower studies made by the APA and NIMH. The survey data are organized into five categories starting with Chapter 2: Supply and demographic characteristics of the sample; Chapter 3: Education and training by sex; also data on FMA's; Chapter 4: Professional Activities; Chapter 5: Geographic distribution by state per 100,000 population; Chapter 6: Economic issues, but no discussion of actual incomes.

4. American Dental Association.
   Distribution of dentists in the United States by state, region, district and county, 1976. Chicago, 1977.

   Includes data on retired dentists, specialists, foreign dentists and women dentists.

5. Hudson, Helen H.
   Sourcebook: nursing personnel. DHEW publication no. (HRA) 75-43. Health Manpower References. Bethesda, Maryland: U.S. Division of Nursing, 1974.

   This publication contains historical and current statistics and references on the supply of nursing personnel and potential resources for the nation.

6. Center for Health Services Research and Development, American Medical Association.
   Physician distribution and medical licensure in the U.S., 1974-. Chicago, 1975.

   Supersedes Distribution of physicians in the U.S., 1963-73.

The 1974 edition of Distribution of physicians has been renamed to include the annual compilation of information and statistics dealing with medical licensure in the U.S. This addition is the 73rd Annual Report of Medical Licensure Statistics which had previously appeared annually in the Journal of the American Medical Association.

The publication provides information on the geographic distribution of medical practice in the United States and Possessions. The tables serve as guides for comparing regions, divisions, states, and counties with respect to their total number of physicians by specialty and professional activity; number of hospitals and hospital beds; number of inhabitants, and some general economic characteristics.

Part 1: Physician Distribution by Regional, State, County, and Metropolitan Areas.

Part 2: 73rd Annual Report of Medical Licensure Statistics

7. American Medical Association.
Reference data on the profile of medical practice 1971-.
Chicago.

The first section of the book contains papers prepared by the staff on issues of current importance to the practice of medicine.

The second section presents data on physician manpower, utilization of services and physicians' income, expenses and fees. Sources are given.

8. U.S. Bureau of Health Manpower.
Optometric manpower resources, 1973. HRA 76-101.
Washington, D.C.: Government Printing Office, 1976.

Report on the number of optometrists licensed to practice in the U.S., 1973. Covers race/ethnicity, school of graduation, and state and region of practice. Data are based on a 1973 survey of 19,541 optometrists conducted by the International Assoication of Boards of Examiners in Optometry.

9. U.S. Bureau of Health Manpower.
Women in health careers. DHEW publication no. (HRA) 76-55.
Washington, D.C.: Government Printing Office, 1976.

Covers women in the United States and other selected countries. Emphasis is on the United States.

Tables contain information by sex for medical practitioners; education and enrollments and specialization.

10. U.S. Bureau of Health Resources Development.
Survey of selected hospital manpower, February 1973, Preliminary report. (HRA) 74-26 (Government Document HE 20.6102:H)

Tables provide estimates of the numbers employed and the numbers of positions vacant for 14 allied health occupations in community hospitals for the U.S., four regions, and nine geographic divisions.

11. U.S. Bureau of Health Resources Development.
The supply of health manpower: 1970 profiles and projections to 1990. Washington, D.C., 1974. (DHEW publication no. HRA 75-38)

"... provides descriptive profiles of the current and past supply of health manpower and projections of manpower supply to 1990 ... The health manpower occupations covered are the major health professional categories, including a number of specialties within these categories, and selected groups of allied health professions and occupations."

12. U.S. Public Health Service. Division of Public Health Methods.
Health manpower source book. 21 vols. Washington, 1952-70. (U.S. Public Health Service publication no. 263)

1. Physicians: preliminary report.
2. Nursing personnel
3. Medical social workers
4. County data from 1950 census and area analysis
5. Industry and occupation data from 1950 census by state
6. Medical record librarians
7. Dentists
8. Dental hygienists
9. Physicians, dentists, and professional nurses
10. Physicians' age, type of practice, and location
11. Medical school alumni
12. Medical and psychiatric social workers
13. Hospital house staffs
14. Medical specialists
15. Pharmacists
16. Sanitarians
17. Industry and occupation data from the 1960 census by state
18. Manpower in the 1960's
19. Location of manpower health occupations, 1962
20. Manpower supply and educational statistics for selected health occupations, 1968.
21. Allied health manpower, 1950-80.

Planned as a comprehensive source book on health manpower. Provides data on health occupations and trends in health manpower. Volume 2 (nursing personnel, published originally in 1953) has had two revisions, in 1966 and 1969.

13. U.S. Division of Nursing.
Nursing personnel in hospitals: 1970 survey of hospitals registered with the American Hospital Association. DHEW publication no. (HRA) 75-49. Health Manpower References, Springfield, Va.: NTIS, 1974 (PB 239-723)

This report presents data for nursing personnel employed in hospitals registered with the AHA. Tables present projected data on the number of nursing personnel employed in these hospitals during the period November 1-7, 1970. Each table shows the number of nurses in a particular personnel category by type and ownership of hospital. Tables also show distribution of nursing personnel in hospitals by type, ownership, size, and geographic location of the hospital.

14. U.S. Division of Nursing.
Nursing personnel in hospitals: 1972 Public Health Survey. DHEW publication no. (HRA) 75-33. Health Manpower References, Springfield, Va., NTIS, 1974. (PB 239-745)

This report presents data for nursing personnel employed in hospitals not registered with AHA. The tables present projected data on the number of nursing personnel employed in these hospitals during the period November 5 through November 11, 1972. Each table shows the number of nurses in a particular personnel category by type and ownership of hospital. State summary tables are given. They show distribution of nursing personnel in hospitals by type, ownership, size, and geographic location of the hospital.

15. U.S. Division of Nursing.
Survey of foreign nurse graduates. DHEW publication no. (HRA) 76-13. Health Manpower References. Washington, D.C.: Government Printing Office, 1976.

Conducted by the American Nurses Association and supported by a Division of Nursing grant, this survey presents data on FNG's by state, countries of nursing education, number of FNG's taking and passing SB&PE, those obtaining temporary permits to practice, marital status, type of nursing education, year of graduation, nursing experience, educational differences.

16. U.S. Division of Nursing.
Survey of registered nurses employed in physicians offices, September 1973. DHEW publication no. (HRA) 75-50. Health Manpower References. Washington, D.C.: Government Printing Office, 1975.

Survey presents tables on the characteristics of nurses, employment conditions (income and benefits), activities performed and participation in continuing education.

17. U.S. National Center for Health Satistics.
Decennial census data for selected health occupations: United States, 1970. HRA 76-1231. Washington, D.C.: Government Printing Office, 1975.

This report considers the following demographic characteristics of 28 categories of health practitioners: sex, ethnic composition; patterns of residence; ratio per 100,000 resident population. Data are presented for the nation, for states, and for 83 SMSA's having a population of 250,000 or more as of April 1, 1970.

18. U.S. National Center for Health Statistics.
Health manpower: a county and metropolitan area data book, 1972-75. DHEW publication no. (HRA) 76-1234. Washington, D.C.: Government Printing Office, 1976.

This publication provides counts of professional persons employed in nine health occupations in the nation's counties and metropolitan areas. The nine types of professionals are: (1) dentists; (2) registered occupational therapists; (3) optometrists; (4) physicians, doctors of medicine; (5) physicians, doctors of osteopathy; (6) psychiatrists; (7) registered nurses; (8) pharmacists; (9) veterinarians.

19. U.S. National Center for Health Statistics.
Health resources statistics; health manpower and facilities. Rockville, Md., 1965- .

Intended to provide current and comprehensive statistics on a wide range of health areas as baseline data for the planning, administration and evaluation of health programs.

First part presents statistics for occupations designated as "health occupations, including allied health occupations." Second part presents statistics on facilities designated as "inpatient health facilities." Third part presents statistics on "outpatient and non-patient health services."

20. U.S. National Center for Health Statistics.
Vital and health statistics. Washington, 1963- .
(Rainbow Series)

Series 14: Data on health resources: manpower and facilities - "Statistics on the numbers, geographic distribution, and characteristics of health resources including physicians, dentists, nurses, other health occupations, hospitals, nursing homes, and outpatient facilities."

HEALTH FACILITIES AND UTILIZATION

1. American Hospital Association.
   Guide to the health care field. Chicago, 1975.

   Annual beginning with 1972. Supersedes Hospitals, Guide issue (in part?), which was issued annually from 1945-1971 as part 2 of the annual Guide issue of hospitals.

   Central reference source for information on health care institutions; on the American Hospital Association; on organizations, agencies, and educational programs in the health field; and on sources of products and services used in hospitals.

2. Anderson, Ronald; Rachel MdL. Greeley Joanna Kravits, and Odin W. Anderson.
   Health service use - national trends and variations, 1953-1971. DHEW publication no. (HSM) 73-3004. Rockville, Md.

   This is a report of survey findings on the use of health services. Regular source of care, physician care, hospital care, surgical procedures, obstetrical care, dental care, Medicaid utilization by state, disability days and physician contacts are tabulated. This information is presented by such variables as age, race, income, residence, and year.

3. Commission on Professional and Hospital Activities.
   Length of stay in PAS hospitals, United States, 1969-74. Ann Arbor, Michigan: Commission on Professional and Hospital Activities. Continued by, Length of stay in PAS hospitals, by diagnosis, United States, 1975. Ann Arbor, Michigan: Commission on Professional and Hospital Activities.

   Data are compiled from individual patient discharge abstracts submitted by hospitals participating in the Professional Activity Study (PAS) of the Commission on Professional and Hospital Activities (CPHA). The length of stay tables show stay distributions for patients discharged during 1975 from short-term non-federal hospitals (2,117 hospitals). A distinction is made between the stay for patients who were operated on as opposed to those who were not. Patients who died, were transferred, or left against medical advice were not included. Other books on length of stay by the CPHA are:

   Length of stay in PAS hospitals, by diagnosis, United States, Southern Region, 1975

   Length of stay in PAS hospitals, by diagnosis, United States, North Central Region, 1975

Length of stay in PAS hospitals, by diagnosis, United States, Northeastern Region, 1975

Length of stay in PAS hospitals, by diagnosis, United States, Western Region, 1975

Length of stay in PAS hospitals, by diagnosis, Canada, 1975.

4. American Hospital Association.
Hospital statistics. Chicago, 1972. Issued separately by the American Hospital Association beginning with 1972 (statistics cover 1971). Previously this was part of the annual Guide issue of hospitals.

Series of tables covering, by various parameters, utilization, finance, personnel, facilities, and services. Updates of many of these tables are published in the bi-monthly issue of Hospitals dated the 16th of each month under the title "Hospital Indicators."

5. Newman, John F, and Odin W. Anderson.
Patterns of dental services utilization in the United States: a nationwide social survey. Research Services - Center for Health Administration Studies, no. 30. Chicago: University of Chicago, Center for Health Administration Studies, 1972.

Data were collected from a national sample of households which reflect overall population characteristics (age, sex, race, income). Tables present data on trends in utilization of services, social and economic variables in the use of services, utilization by type of service (cleaning, filling), effect of symptoms on utilization in conjunction with demographic and socioeconomic variables, and continuity of utilization.
See also: NCHS Series 10 and 11.

6. Piore, Nora.
A statistical profile of hospital outpatient services in the U.S.: present scope and potential role. New York: Association for Aid to Crippled Children, 1971.

The report provides an overview of the scope and characteristics of hospital based ambulatory care. It describes data presently available and data needed for analysis. The report also sets forth some public policies which would lead to the use of hospital clinics and emergency rooms as a network of comprehensive health care centers.

7. Scitousky, Anne A. and Neld M. Snyder.
Medical care use by a group of fully insured aged; a case study. DHEW publication no. (HRA) 76-3129. Washington, D.C.: Government Printing Office, 1976.

The purpose of the study is to find information on the use of medical care. The study is an examination of the use of medical care by 500 persons aged 65 and over all of whom have a middle- to upper-middle-class background and access to medical services. The study indicates the demand for medical services that older people might make if they had middle-class standards of medical care and services were provided free of charge. Utilization data is given for physician's services, hospital care, nursing home care, and other medical care services. Expenditures are also compared to the national average. There is a brief bibliography.

8. U.S. Social Security Administration. Office of Research and Statistics.
Health insurance statistics notes. 1965- (?)

Continuing series of reports on the structure and utilization of medicare hospital insurance programs. Subjects include members, eligibility, and characteristics of enrollees. The reports are issued on a more or less monthly basis.

9. U.S. National Center for Health Statistics.
Hospitals: A county and metropolitan area data book. DHEW publication no. (HRA) 76-1223. Rockville, Maryland.

This report includes hospitals by type, number of beds and staff by state. For SMSA's, beds, average daily census and occupancy are listed. For each county, beds, average daily census and ownership for general and specialty hospitals listed.

10. U.S. National Center for Health Statistics.
Nursing homes - a county and metropolitan area data book. DHEW publication no. (HSM) 73-1215 Section 2. Rockville, Md.

Data is recorded by SMSA and by county for all states in the United States. The number of homes, number of beds, number of residents and personnel and occupancy rate is tabulated. The information on homes providing nursing care is separated from that of homes not providing nursing care.

11. U.S. National Center for Health Statistics.
State estimates of disability and utilization of medical services: United States, 1969-71. DHEW publication no. (HRA) 77-1241. Washington, D.C.: Government Printing Office, 1977.

Data are taken from the NCHS Health Interview Survey. The estimates are termed "synthetic" because they were not directly

derived from survey results and the results are biased estimates.

Tables present data by geographic (region and state) and socio-economic variables.

The report is "in response to the continually growing demand for state and small area statistics on health-related topics."

12. U.S. National Center for Health Statistics.
Vital and health statistics series. Washington, D.C. 1963- .

Series 13: Data on health resources utilization. This series offers statistics on the utilization of health manpower and facilities providing long-term care, ambulatory care, hospital care, and family planning services.

HEALTH CARE FINANCING:

1. Berry, Ralph E.
The economic cost of alcohol abuse. New York: Free Press, 1977.

Book discusses and presents statistics on the economic cost of alcohol abuse. Statistics include the cost of lost production, health care costs, cost of motor vehicle accidents, cost of fires, cost of crime and the cost of "social responses" such as rehabilitation, public assistance, workman's compensation, fire protection and criminal justice.

2. Cooper, Barbara S.
Compendium of national health expenditures data. DHEW publication no. (SSA) 76-11927. Washington, D.C.: Government Printing Office, 1977.

All available data on health expenditures are presented in this compendium. No attempt at analysis is made. Tables present statistics on trends in health expenditures, 1929-74; total national health expenditures; expenditures under public programs; private health insurance; expenditures by age groups. A list of sources is provided.

3. Cooper, Barbara S., and Dorothy P. Rice
"The Economic Cost of Illness Revisited." Social Security Bulletin 39(2), p. 21-36, 1976.

This article updates the earlier study by Dorothy P. Rice of the cost of illness (see Rice). For the 16 major diagnostic categories of illnesses, the cost is presented in terms of the

direct costs for prevention, detection and treatment and the indirect costs due to disability and premature death. The categories of disease covered are general, although there is a discussion of the cost of stroke which is not covered in the tables. Diagnostic categories are: infective and parasitic diseases; neoplasms; endocrine, nutritional, and metabolic diseases; diseases of the blood and blood-forming organs; mental disorders; diseases of the nervous sytem and sense organs; diseases of the circulatory system; diseases of the respiratory system; diseases of the digestive system; diseases of the genitourinary system; complications of pregnancy, childbirth, and the puerperium; diseases of the skin and subcutaneous tissue; diseases of the musculoskeletal system and connective tissue; congenital anomalies; accidents, poisonings, and violence; other.

4. Cooper, Barbara S. and Worthington, Nancy L.
   Personal health care expenditures by state. DHEW publication no. (SSA) 73-11906. Washington, D. C.: Government Printing Office, 1973.

   Volume I - Public funds, 1966 and 1969. Presents personal health care expenditures under public programs. State data are presented for each public program by source of funds and by type of expenditure

   Volume II - Public and private funds, 1966 and 1969. Presents state estimates of total spending by source of funds and type of expenditure.

5. Hu, Teh-wei, editor.
   International health costs and expenditures. DHEW publication no. (NIH) 76-1067. Geographic Health Studies. John E. Fogarty International Center for Advanced Study in the Health Sciences. Washington, D.C.: Government Printing Office, 1976.

   Proceedings of a conference in health economics covering papers discussing health costs in Belgium, Canada, Denmark, France, The Netherlands, Romania, Sweden, the United Kingdom, the United States, and West Germany. Each paper presents many tables and charts with data on health expenditures. Comparisons between the U.S. and other countries are made as well.

6. Koleda, Michael.
   The Federal health dollar. Washington, D.C.: Center for Health Policy Studies, National Planning Association, 1977.

   This chartbook provides an overview of the expenditures of the federal government for health related activities for 1969-76. This include: health research, health manpower training, provision of health services, construction of health facilities,

prevention in control of health problems and improving the delivery of health care. No attempt is made at evaluation.

7. American Council of Life Insurance.
Life insurance fact book. New York, 1946- .

A statistical portrait of the life insurance business. Tables include information about health insurance benefit payments provided by life insurance companies.

8. Mueller, Marjorie Smith and Robert M. Gilson.
"National health expenditures, fiscal year 1976." Social Security Bulletin 40 (4):3-22, 1977.

This subject is covered in a series of articles which are revised for each fiscal year. Tables and charts present statistics on aggregate and per capita national health expenditures; type of expenditures and source of funds; personal health care expenditures by type of expenditure; expenditures for health services by public program and source of funds; trends for 1929-1976 are also given.

9. National Commission on Diabetes.
Final report. Volume III, Part 2 - Scope and Impact of Diabetes. DHEW publication no. (NIH) 76-1022. Washington, D.C.: Government Printing Office, 1976.

Volume III, Part 2 covers the reports of the work groups on mortality and economic impact.

The report on morbidity covers diseases associated with diabetes such as ocular and renal disease, coronary heart disease, neuropathy and coma. Some statistics are presented in the discussion, although there are no extensive tables.

The report of the work group on economic impact presents extensive data on the cost of diabetes including direct, indirect, and costs of complications.

10. Rice, Dorothy P.
Estimating the cost of illness. Health Economics Series No. 6. U.S. Public Health Service, publication no. 947-6. Washington, D.C.: Government Printing Office, 1966.

This [three-part] study presents a framework for calculating the economic costs of illness, disability and death and performs the calculations. Part I discusses the problems involved in measuring annual direct costs of illness, describes the procedures adopted, and presents data for selected types of health expenditures in 1963 by diagnosis. The second part deals with the annual indirect losses associated with illness, disability

and death. Included are the economic concepts, estimating procedures and estimates of the total man-years lost and productivity losses resulting from morbidity and mortality in 1963 for each diagnostic category. The third part presents the methodology and resulting estimates of the present value of the future earnings for those people who died in 1963.

11. Rufener, Brent L. et al.
Management effectiveness measures for NIDA drug abuse treatment programs, final report. National Institute on Drug Abuse, 1976.

Report on cost-benefit for five drug abuse treatment modalities: methadone, maintenance, therapeutic community, outpatient drug free, outpatient detoxification, and inpatient detoxification. Report is published in two volumes: Volume I: Cost Benefit Analysis; Volume II: Cost to Society of Drug Abuse.

12. Scitovsky, Anne A. and Nelda McCall.
Changes in the costs of treatment of selected illnesses, 1951-1964-1971. NCHSR Research Digest Series. DHEW publication no. (HRA) 77-3161. Health Resources Administration, 1976.

The purpose of the study was to determine what light the data would shed on the Bureau of Labor Statistics medical care price index for the period 1964-1971 and to analyze the effects of changes in treatment on costs. Tables show average costs for selected illnesses and the percentage change in average cost 1951-64 and 1964-71. In addition, the number of diagnostic and other services per care; and the average number of physician visits and average length of hospital stay per case, 1951, 1964 and 1971 are detailed. Illnesses examined are: otitis media in children, acute appendicitis, maternity, breast cancer, forearm fractures in children, pneumonia, duodenal ulcer, and myocardial infarction.

13. Social Security Bulletin.
Annual statistical supplement, 1956- . Washington, D.C.: Government Printing Office.

Annual report on social security funds, coverage, benefits, and beneficiaries. Presents detailed breakdown of OASDHI coverage and benefits by age, sex, and race. Also a summary of black lung and public assistance programs.

14. Health Insurance Institute.
Sourcebook of health insurance data, 1959- . New York.

Provides the latest available data for the year published on the major forms of health insurance as well as medical care costs. Data on medical care costs include: personal and national expenditures, consumer price index, hospital charges and costs. Also some data on morbidity trends.

15. U.S. Congress. Congressional Budget Office.
Long-term care: actual cost estimates. Washington, D.C.: Government Printing Office, 1977.

Presents detailed information on the demand for long-term health and social services, the existing supply of those services, and the cost for increasing them.

Tables include: sources and uses of funds; estimated spending FY 1977-1985; estimated effect on spending for home health services FY 1979-1985.

16. U.S. Department of Health, Education and Welfare. Public Health Service. Health Services and Mental Health Administrations.
Determinants of expenditures for physicians' services in the United States, 1948-1968. DHEW publication no. (HSM) 73-3013.

Expenditures for physician services is examined over time, 1948-68 and across states, 1966. The data is broken down by such items as quantity of services, source of payment, per capita income, age, sex and state.

17. U.S. National Cancer Institute. Biometry Branch.
Third national cancer survey: hospitalizations and payments to hospitals. Part A: summary. DHEW publication no. (NIH) 76-1094. 1976.

This report presents data from the first major study undertaken by the National Cancer Institute which directly measured hospitalizations for specific cancer patients.

The costs were correlated with a variety of factors including age at time of diagnosis, survival, site of cancer, extent of disease, medical procedure, admission sequence and source and number of payers.

It also provides a complete history of payments to hospitals for inpatient care over a two-year follow-up period.

18. U.S. National Institute of Neurological and Communicative Disorders and Stroke.
Neurological and communicative disorders: estimated numbers and cost. DHEW publication no. (NIH) 77-152. Washington, D.C.: Government Printing Office, 1976.

A small pamphlet that presents a table of neurological and sensory disorders, and the mortality, estimated total cases, and estimated annual cost of care. Some estimated cases were obtained from voluntary organizations.

19. U.S. Social Security Administration. Office of Research and Statistics.
Health insurance for the aged: annual program data.

The official statistical record of the Medicare program compiled and analyzed for each year. Designed to cover all areas of the Medicare program, the releases include:

Section 1 - Summary. Capsulizes data for hospital and supplementary medical insurance programs for the year. Also presents comparative data with previous years. 1.1: Reimbursement by State and County. Data published for 1969, 1970, 1971, and 1972. 1.2: Utilization and reimbursement by person. Data published for 1966, 1967, 1968 and 1969. 1.3: Reimbursement - geographic index. Data published for 1968, 1969, 1970, 1971 and 1972.

Section 2 - Enrollment. Contains Medicare enrollment data by age, race, sex, region, division, state of residence, and standard metropolitan statistical area. Data published for 1969, 1970, 1971, 1972 and 1973. (1974 data in press.)

Section 3 - Participating providers of service. Presents data on such providers of service under Medicare as hospitals, home health agencies, independent laboratories, and skilled nursing facilities. Data published for 1969, 1970, 1971 and 1972-74.

Section 4 - Short-stay hospital utilization. Presents utilization data for inpatient care for short-stay hospitals. Data published for 1966, 1967, 1968-72.

Length of stay by diagnosis. National and regional data on the number of Medicare discharges from short-stay hospitals, the mean and median length of stay and percentile distribution of days of care for selected diagnoses. For each diagnosis data are presented for patient age, presence of secondary or complicating conditions, and whether or not surgery was performed. Data published for 1969, 1970 and 1971.

20. U.S. Social Security Administration. Office of Research and Statistics.
Medical care costs and prices: background book. DHEW publication no. (SSA) 75-11909. Washington, D.C.: Government Printing Office, 1975.

Comprehensive data on the costs and prices of hospital care, physicians' and dentists' services, and on significant trends in these expenses.

21. U.S. Social Security Administration. Office of Research and Statistics.
Research and statistics note, 1965-(?)

Continuing series of reports on various aspects of social security programs. Subjects include health expenditures, hospital and medical care costs, veterans programs, workman's compensation. The bulletins are issued on a more or less monthly basis.

22. U.S. Social Security Administration. Office of Research and Statistics.
Size and shape of the medical care dollar: chartbook 1975. Washington, D.C.: Government Printing Office, 1976.

Charts present facts about the medical dollar - who pays, what and how much is bought, for whom it is spent.

Shows trends in medical care outlays, the causes of rising hospital costs, and roles of private and public financing.

HEALTH EDUCATION:

1. American Dental Association.
Annual report on dental education, 1967-68 - Chicago, Illinois.

Report contains information on dental schools, admissions, enrollment (by sex), graduates (sex and state), student educational expenses and faculty positions.

Supplements to this report present additional information, such as auxilliary dental education.

2. Association of American Medical Colleges. Office of Minority Affairs.
Minority student opportunities in United States medical schools, 1975-76. Washington, D.C.: The Association, 1975.

Although designed as a source of information for prospective minority medical students and their advisors, this book provides minority application and enrollment statistics as well for 108 of the 114 medical schools in the U.S. Statistics include: number of minority students who applied, number accepted for admission, number who matriculated, and total number of minority students.

3. Commission on Physicians for the Future.
Physicians for the future. New York: Josiah Macy, Jr. Foundation, 1976.

This is an analysis of the demand for physicians and the ability of the educational system to respond to it. The appendix is the

statistical background for the report and many tables on both the supply of physicians and enrollments in medical schools. Foreign medical graduates are also taken into account. The bibliography is quite extensive and lists the sources for all statistics cited.

4. Institute of Medicine.
   Costs of education in the health professions: report of a study, Parts I and II. Washington, D.C.: National Academy of Sciences, 1974.

5. Larson, Thomas A. and Coralie Farlee, Ph.D.
   National estimates of faculty manpower in U.S. medical schools, Final Report. [Supported under DHEW contract # NO1-OD-5-2130] Washington, D.C.: Association of American Medical Colleges, 1977.

   Data were gathered from three sources: the AAMC-AMA Liaison Committee on Medical Education, the annual AAMC Salary Survey, and the AAMC Faculty Roster System.

   The computer-generated reports display annually for the period 1970-1975 faculty counts by rank and degree, department, or specialty.

   National estimates of annual faculty appointment, turnover, and promotion have been generated.

6. 74th Annual Report. Medical education in the United States, 1973-74. Journal of the American Medical Association. "Education Number"

   The first report on medical education in the United States was published in 1901 in JAMA.

   The current volume presents information in seven sections, some narrative and some statistical:

   Section 1: financial information
   Section 2: student enrollment, faculty, curriculum
   Section 3: graduate medical education
   Section 4: continuing medical education
   Section 5: allied medical education
   Section 6: programs sponsored by government agencies
   Section 7: public health education

7. Ott, Mary D.
   Women's participation in first-professional degree programs in medicine, dentisty, veterinary medicine, and law, 1969-70 through 1974-75. NCES 76-023. Washington, D.C.: Government Printing Office., 1976.

Report on the number of women enrolled and receiving degrees in first professional degree programs in four disciplines, school years 1969-70/1974-75. Data are from NCES surveys and professional associations.

8. National League for Nursing.
   Some statistics on Baccalaureate and higher degree programs in nursing - 1975-76. New York: 1977. Publication no. 19-1649.

   This is a supplement to the data published annually in Nursing Outlook and to statistical summaries published in the 1976 edition of State-approved Schools of Nursing.

   Statistics for enrollments and graduations of nurses in Doctoral, Masters, and Baccalaurete programs are given. Totals are 1965-75.

   Financial assistance statistics are also given.

   Statistics are broken down by geographic region and functional area of study.

9. U.S. Bureau of Health Manpower.
   Health professions schools: selected enrollment data, 1970-71/1977-78. Health Manpower References. HRA 77-11. Washington, D.C.: Government Printing Office, 1976.

   "The purpose of this report is to provide enrollment data for each school of medicine, osteopathy, and dentistry and each school of optometry, podiatry, and veterinary medicine for the period academic years 1970-71 through 1977-78."

10. "U.S. medical student enrollment 1972-73 through 1976-77."
    Journal of Medical Education, 52:164-166. February 1977.

    Updated annually in the Datagram section of the Journal in the early part of the year.

    Tables present information about first-year U.S. medical school enrollments by sex, minority group and foreign student variables.

    Tables present information for total U.S. medical school enrollments by the same variables.

V. PRACTICAL EXERCISES

The questions below are actual questions as received by reference librarians in several libraries. They are meant to challenge your powers of reasoning (as they did the original librarians!). Naturally an exercise of this kind is ideally conducted with the reference collection at hand. It would be cumbersome at best to move a collection into this classroom so you are asked to follow these directions instead.

Directions

For each question answer the following:

A. Which source would you consult first and why?

B. Tell one or two alternate sources in case the first fails.

Questions

1. What is the mortality rate for cirrhosis in the U.S.? Has it increased or decreased in the last 20 years?
2. I'm trying to find out the average longevity of physicians. Is it longer than other people's?
3. I would like to get a measure of infant deaths in Southern counties of the U.S. for 1940, to compare with current figures.
4. Can you tell me how many quadruplet births occurred last year?
5. I need national statistics on the number of children who were poisoned last year (1976) or the most recent year.
6. I would like to get an overview of the incidence and prevalence of such diseases as heart disease, diabetes, and intestinal problems for the most recent year possible.
7. What is the incidence rate of cystic fibrosis by race, sex, and community and state?
8. I need to know the number of people who are blind in this country, totally blind.
9. Do you have any statistics on oral contraceptive use?
10. Can you supply any figures on the cost of treating cancer, diabetes and hypertension?
11. What is the average total medical cost for a family or single person per year?

12. What is the average income of psychiatrists?

13. Do you have any figures on the average hospital charges to the patient per patient day by state?

14. What is the life expectancy for black males today as compared to 1900?

15. I'd like to know the number of pharmacists in the U.S. and how they are distributed.

16. How many black women have hypertension as opposed to white women?

17. Can you tell me where I can find information on the number of tooth extractions done annually?

18. I need data on the effects of smoking and life expectancy.

19. What is the suicide rate in Sweden?

20. What was the number of patient visits to physicians in 1976 (in the U.S.)?

21. What were national health expenditures (both public and private) last year?

22. A student would like statistics on the incidence of alcoholism and drug abuse for a general health survey.

23. What was the number of legal abortions in Utah in 1975?

24. How many homosexuals are there in the U.S.?

25. What is the percentage of women in the various medical specialties?

VI. GENERAL STATISTICS

A. Demographic and Socioeconomic Statistics

The data which describes the population in a given area is of great importance to those who use health statistics because it forms the basis for analyzing the health data. Data on health services or utilization have no meaning unless they can be related to a specific population. It is important to know the age, sex, ethnic group, occupation, marital status, and even the physical environment of the group to be able to analyze what the morbidity and mortality figures really mean.

The characteristics of a population, or the population profile, include:

1) Demographic characteristics such as age, race, sex, marital status

2) Housing characteristics

3) Socioeconomic characteristics such as income, poverty status, education, occupation.[1]

B. Agencies

Bureau of the Census

One of the principal functions of the Bureau is the decennial census of population and housing. In addition, the Bureau publishes estimates and projections of the population and provides current data on population and housing characteristics. It produces statistical compendia, catalogs, guides, and directories to help locate information.[2]

Bureau of Labor Statistics (BLS)

The BLS has responsibility for the Department of Labor's economic and statistical research activities. The Bureau is the Government's principal factfinding agency in the field of labor economics, with respect to collection and analysis of data on manpower, occupation safety and health and other related socioeconomic issues.[3]

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[1]National Health Planning Information Center. Guide to data for health systems planners. DHEW publication no. (HRA) 76-14502. Washington, D.C.: Government Printing Office, 1976. p. 26.

[2]U.S. Government Organization Manual 1977-78. Washington, D.C.: General Services Administration. National Archives and Records Service, Office of the Federal Register, 1977, p. 157.

[3]Ibid, p. 377.

C. BIBLIOGRAPHY

DEMOGRAPHIC STATISTICS

1. Bureau of the Census.
Current population reports, population characteristics. Series P-20. Washington, D.C.: Government Printing Office.

Latest national data on specified characteristics of the population.

2. Bureau of the Census.
Current population reports, population estimates and projections: 1973 population estimates for counties, incorporated places and and selected minor civil divisions. Series P-25. Washington, D.C.: Government Printing Office. No. 1- . 1947- .

3. Bureau of the Census.
Current population reports, federal-state cooperative program for population estimates. Series P-26. Washington, D.C.: Government Printing Office. No. 1- . 1969- .

Data for states, counties, SMSA's on the total population and components of change (births, deaths, migration).

4. Bureau of the Census. U.S. Census of Population-1970.
Detailed characteristics, final report.
Washington, D.C.: Government Printing Office, 1970-1972.
Series PC(1) D1--PC(1) D52.

Data for states, cities, SMSA's by age, race, state or country of birth, parentage, residence, education, number of children, veteran status, place of work, occupation, income.

5. Bureau of the Census.
County and city data book, 1972. Washington, D.C.: Government Printing Office, 1972.

Contains population and housing data from the 1970 Census broken down geographically by city and county.

Data elements included: population by age, race, sex, education, income, labor force status, occupation, industry and living arrangements, areas by land, birth and death rates, housing characteristics, public assistance, hospital characteristics.

6. Bureau of the Census.
Congressional district data book. Washington, D.C.: Government Printing Office, 1973.

Contains population and housing data from the 1970 Census broken down geographically by congressional district.

7. U.S. Department of Labor. Bureau of Labor Statistics.
   Black Americans, a chartbook, Bulletin 1699. Washington, D.C.: Government Printing Office, 1971.

   Charts on migration and population, employment, income, poverty, family, vital statistics and health, housing, crime and citizenship for black people are presented.

8. U.S. Department of Health, Education and Welfare, Public Health Service, Health Resources Administration, National Center for Health Statistics.
   Vital statistics of the United States, 1937- . Volume III--Marriage and Divorce. Washington, D.C.: Government Printing Office.

   Annual publication with data by states, county, and region.

SOCIOECONOMIC AND HOUSING STATISTICS

1. Department of Health, Education and Welfare, Social Security Administration. Office of Research and Statistics.
   Earnings distribution in the United States, 1968. Washington, D.C.: Government Printing Office: 1973. DHEW publication no. (SSA) 73-11914.

   Data on reportable earnings, characteristics of workers, and other data for U.S. regions, states, metropolitan areas, nonmetropolitan areas and SMSA's.

2. Bureau of the Census.
   U.S. census of population-1970: employment profiles of selected low-income areas, final report. Washington, D.C.: Government Printing Office, 1972. Series PHC(3)1--PHC(3)76.

   Covers 60 urban areas and 7 rural areas. Data on the labor force, employment status, occupation and industry.

3. Bureau of the Census.
   U.S. census of population, 1970: Volume II, subject reports. Final report. PC(2)-9B Low-income areas in large cities. Washington, D.C.: Government Printing Office, 1973.

   Covers 60 largest cities with data on selected demographic characteristics, socioeconomic and housing characteristics with emphasis on income levels.

4. Sourcebook of criminal justice statistics, 1974. Annual. July 1975.

   Second annual comprehensive compilation of statistics on criminal justice and related matters. Includes reported

marijuana use among the general population by demographic characteristics among the adult and youth population.

Also forcible rapes: characteristics of the victim and offender by sex, race, and age.

5. Bureau of the Census, Subscriber Services.
Status: A monthly chartbook of social and economic trends. July-Oct., 1976. Ceased publication.

Monthly chartbook portraying current and trend data on social and economic conditions in the U.S. Data compiled from publications of all major statistics-producing federal agencies.

6. U.S. Office of Management and Budget. Statistical Policy Division.
Social Indicators, 1976. Washington, D.C.: Government Printing Office, 1977.

This is a collection of statistics to describe social conditions and trends in the U.S. Eight major social areas are examined of which health is the first. The three concerns examined are life expectancy, disability and access to medical care. Other areas covered are public safety, education, employment, income, housing, leisure and recreation, and population.

7. Social and economic status of Negroes in the U.S., 1974.

8. U.S. Department of Labor. Bureau of Labor Statistics.
Handbook of Labor Statistics. Washington, D.C.: Government Printing Office.

The annual edition of the Handbook makes available in one volume the majority of data collected by BLS. Each table is complete historically, beginning with the earliest reliable and consistent data. The data are grouped under economic subject headings.

9. U.S. Department of Labor. Women's Bureau.
1975 Handbook on women workers. BLS Bulletin No. 297. Washington, D.C.: 1975.

A compilation of data on women workers, including labor force participation, patterns of employment, earnings, and education. Statistics are arranged according to age, marital and family status, educational attainment, and race. Data are presented for the period 1972-1974, with selected trends from 1940 to the present.

10. U.S. Bureau of the Census.
A statistical portrait of women in the United States: current population reports. Special Studies. Washington, D.C.: Government Printing Office, 1976.

This report presents a statistical portrait showing "the role of women in the United States during the 20th century." Data are from government sources: surveys, decennial censuses, vital statistics, and administrative records. Selected data are provided in a historical framework, beginning in 1950, or earlier if statistics are available. The analyses trace trends among women in the areas of population growth and composition, longevity, mortality and health, residence and migration, marital and family status, fertility, education, labor force participation, occupation and industry, work experience, income and poverty status, voting and public office holding, and crime and victimization. Comparisons of black and white women are discussed separately, and recent data are included for women of Spanish origin.

VII. SOURCES FOR LOCATING ARTICLES OR BOOKS CONTAINING STATISTICAL INFORMATION

A. Indexes and Abstracts

1. American Medical Association
   Medical socioeconomic research sources. Aspen Systems Corporation. Vol. 1- . 1971- . (Published quarterly and cumulated annually.)

   "Medical Socioeconomic Research Sources (MEDSOC) is a guide to publications in the sociology and economics of medicine in the English language." All types of sources are covered including journal articles, newspapers, legislation, books and pamphlets. A list of serials which is included in the annual cumulation reveals that there are indeed some services not covered by Index Medicus. A separate list of books is also added.

   Subject headings, although based on MESH, reflect the slant of the index. Subject headings of interest include: population, poverty, demography, social conditions.

2. Congressional Information Service.
   American statistics index: a comprehensive guide and index to the statistical publications of the U.S. Government. Washington, D.C. (Annual, with monthly supplements.) Volume 1- . 1973- .

   The purpose of ASI is to indentify all statistical data published by the federal government, to catalog publications in which data appear, to describe the contents, to index in full subject detail, and to micro-publish the publications indexed.

   Index is by subject, names, and title.

3. National Library of Medicine.
   Current Bibliography of Epidemiology (CUBE). V. 1-7. 1970-1978. Monthly. Washington, D.C.

   Provides a comprehensive index to current periodical literature in epidemology, preventive medicine and public health.

   Publication was discontinued after the December 1977 issue.

4. Excerpta Medica Abstract Journals. Vol. 1- , 19- . Amsterdam.

   There are 42 sections to this abstracting service. While all sections are likely to contain references to works of a statistical nature the two sections, Health Economics and Hospital Management; and Public Health, Social Medicine and Hygiene are good places to look for statistics in these areas.

Each section is arranged according to a specially designed classification system. In addition there are author and subject indexes in the back which refer to an abstract number. When you turn to the abstract number in the main section each citation is given with the following information: the title of the article in English (followed by the title in the original language when appropriate), the author's name and address, abbreviated journal title, year of publication, volume and issue numbers and pages followed by the abstract. This tool is especially good for foreign material.

5. National Library of Medicine.
   Index Medicus, Its Predecessors and MEDLINE. Washington, D.C.

This publication currently indexes approximately 3000 of the world's biomedical journals. Original articles are indexed as well as letters, editorials and biographies which have substantive contents. Recent monographs (published proceedings, symposia and selected multi-authored works) have been included. The Index is divided into author and subject sections. The subject section is further broken down into subheadings. Statistical papers are often found by looking under the relevant main heading with one of the following subheadings: complications, etiology, manpower, occurrence, supply and distribution. Thus if information is desired on the incidence of endometriosis in a particular group of women you would look under ENDOMETRIOSIS with the subheading occurrence.

6. Population Index. V. 1- . 1935- . Princeton, New Jersey.
   Published quarterly.

This index covers international demographic research, but there is a geographic index for the U.S. Subject headings include: general population studies and theory, trends in population size, spatial distribution, fertility, demographic and economic interpretations.

It also lists official statistical publications of foreign countries, the U.S., states of the U.S., and bibliographies.

7. U.S. National Center for Health Statistics. Clearinghouse on Health Indexes.
   Bibliography on Health Indexes. No. 1- . 1974- .

The Clearinghouse has been established to provide information which will be helpful in developing composite health measures. Accordingly, the following definition of health index has been adopted: "a health index is a measure which purports to reflect the health status of an individual or defined groups."

The selection of documents in the Clearinghouse file and this annotated quarterly Bibliography on Health Indexes includes journal articles, books, conference proceedings, government publications, and reports on grants and contracts.

8. Bureau of the Census.
   Historical statistics of the United States: Colonial Times to 1970. Washington, D.C.: Government Printing Office, 1976.

   This volume is designed to bring together historical series of wide general interest and to inform the user where additional data can be found. It is a supplement to the annual Statistical Abstract of the United States.

   The chapters on Population, and Vital Statistics and Health and Medical Care are excellent in that the sources of the statistics are discussed.

9. Bureau of the Census.
   Statistical abstract of the United States. Washington, D.C.: Government Printing Office.

   This annual standard summary of statistics on the social, political, and economic organization of the United States is designed to serve as a convenient volume for statistical reference and a guide to other statistical publications and sources. Major sections of interest include: population, vital statistics, education, income, labor force.

B. Selected List of Journals Routinely Having Statistical Articles

1. American Journal of Epidemology
2. American Journal of Public Health
3. American Journal of Tropical Medicine and Hygiene
4. Archives of Environmental Health
5. Bulletin of the World Health Organization
6. International Journal of Epidemology
7. International Journal of Health Services
8. Inquiry
9. Journal of Occupational Medicine
10. Medical Care
11. Medical Economics
12. Metropolitan Life Insurance Company Statistical Bulletin
13. Milbank Memorial Fund Quarterly
14. PAS Reporter
15. Preventive Medicine
16. Public Health Reports
17. Social Security Bulletin
18. WHO Technical Report Series
19. WHO Statistics Report

VIII. ACQUISITION AIDS

A. PUBLICATIONS AND ADDRESSES

1. Parklawn Health Library
   Bulletin. Rockville, Md. No. 1- . 197? Semi-monthly.

   Lists recent acquisitions of the Parklawn Health Library in three parts. Part I: New books, subject heading arrangement; Part II: Publications from the KWIC Index (a keyword in context list of publications of HRA, HSA, CDC, and other public health reports); Part III: Highlights of journal literature.

   Write to Library to be placed on mailing list: U.S. Department of Health, Education and Welfare, Public Health Service, Parklawn Health Library, Parklawn Building (13-12), 5600 Fishers Lane, Rockville, MD 20857.

2. U.S. Department of Commerce, National Technical Information Service
   Health planning [Washington]. 197?- Weekly. $50.00 (U.S.) $65.00 (foreign) paper. Other title: Weekly government abstracts. Health planning

   "Included in this series are documents relating to health services and health needs; health services and facilities utilization; health manpower requirements, utilization and education; health related costs; methods of health services funding; and government and private agency activities relating to health planning and resources development."

   Final issue is annual subject index.

   National Technical Information Service, U.S. Department of Commerce, 5285 Port Royal Road, Springfield, VA 22161

3. U.S. Bureau of the Census
   Bureau of the Census Catalog. 1946- . Washington, D.C. Cumulates quarterly-to-annual with monthly supplements. $14.40 (U.S., 4 consecutive issues and 12 monthly supplements); $18.00 (foreign)

   U.S. Bureau of the Census, Subscriber Services Section (Publications), Washington, D.C. 20233

4. U.S. Bureau of the Census
   Data user news. Washington, D.C.: U.S. Department of Commerce Bureau of the Census. For sale by Subscriber Services Section (Publications), Bureau of the Census. v. 10, no. 1- . January 1975- . Monthly. $400 (U.S.) $0.25 (single). Continues Small-area data notes. Each issue contains a section entitled "Selected New Publications." U.S. Bureau of the Census, Subscriber Services Section (Publications), Washington, D.C. 20233.

5. U.S. Health Resources Administration
Catalog of publications. Rockville, Md., 1977 (DHEW publication no. (HRA) 77-615)

Lists most publications since 1974 of HRA units (National Center for Health Statistics, National Center for Health Services Research, Bureau of Health Manpower, Bureau of Health Planning and Resources Development), giving a brief description of each and availability statement "where necessary."

Request copies from: 5600 Fishers Lane, Rockville, MD 20857

6. U.S. Social Security Administration.
Research publications. Quarterly.

Catalog which identifies and annotates research publications produced by the SSA, Office of Research and Statistics (ORS). Tells availability, source, and price.

Free - write to ORS, Social Security Administration, 1875 Connecticut Avenue, N.W., Washington, D.C. 20009

7. U.S. National Center for Health Statistics.
News of the cooperative health statistics system. No. 1- , 1974- . Bimonthly.

Newsletter to provide information exchange between NCHS and state agencies collecting vital and health statistics. Each issue lists new publications of NCHS.

Free - write to the National Center for Health Statistics, HRA, Center Building, 3700 East-West Highway, Hyattsville, MD 20782

Note: NCHS can be called for a publication on their hot-line: (301) 436-8500.

8. R. R. Bowker
International bibliography information documentation (IBID). Vol. 1- , 1973- . Quarterly.

Provides bibliographic information on the current publications of the U.N. organizations: FAO, ILO, PABO, UNESCO, WHO

Includes books, periodicals, microforms.

Information on how to acquire material and a list of national distributors is given.

9. Eccles Medical Sciences Library, University of Utah.
MEDOC: A computerized index to U.S. government documents in the medical and health sciences. Vol. 1, 1968-74. Vol. 2, 1975-. Salt Lake City.

Covers a selection of relevant documents giving SuDoc number, title, subject, series, and agency. Other information tells whether it is a pamphlet, price.

Eccles is a depository library.

USEFUL ADDRESSES:

National Clearinghouse for Alcohol Information
Box 2345
Rockville, MD 20852
Phone: (301) 948-4450

National Clearinghouse for Drug Abuse Information
712 Jackson Place, N.W.
Washington, D. C. 20506

National Clearinghouse for Mental Health Information
NIMH
5600 Fishers Lane
Rockville, MD 20857
Phone: (301) 443-4517

National Clearinghouse for Smoking and Health
Center for Disease Control
Atlanta, GA 30333
Phone: (404) 633-3311

Cancer Clearinghouse
7910 Woodmont Avenue
Bethesda, MD 20014
Phone: (301) 496-4070

IX. GENERAL STRATEGY FOR ACCESSING STATISTICS

There is no sure, fool-proof, no-fail, way to find statistics in the health field. Someone will add a little twist or an extra variable to his or her request that will boggle the best of detective minds in trying to find an answer.

However, there are a few questions to keep in mind when looking for answers to statistics questions.

1. What is the subject of the question?
2. Is this an area in which statistics are regularly collected? If so, in which publication do they appear?
3. If the question involves morbidity, ask yourself whether it is a notifiable disease or a chronic one.
4. Do the variables asked for make sense?
5. Which index is best to consult for this subject?
6. Which agency, public or private, would be likely to have information?
7. Is it a likely topic for a journal article and can be searched on MEDLINE?
8. Is it possible that no statistics exist to answer this request?

Aids in teaching how to answer statistical reference questions are as follows:

Jahoda G., Braunagel, J., and Nath, H. "The Reference Process: Modules for Instruction." RQ, Fall, 1977, pp. 7-12.

Rutstein, Jack S. Access to U.S. Government Statistics Through Course-Related Instruction. Ft. Collins, Colorado: Colorado State Libraries, 1976. Available from ERIC Document Reproduction Service (EDRS), P.O. Box 190, Arlington, VA 22210. ED-134-211. MF-0.83 HC $1.67.

X. FOR FURTHER STUDY

A. General Bibliographies or Guides

1. Andrews, Theodora.
A bibliography of the socioeconomic aspects of medicine. Littleton, Colo.: Libraries Unlimited, Inc., 1975.

The materials selected for this bibliography include those that have social, political, and economic implications. The bibliography is limited to English language materials. Included are reference books and monographs, a few pamphlets, and annuals are lsited.

2. Jensen, Marilyn Anne.
"Selected sources of current population, vital, and health statistics." Bulletin of the Medical Library Association 60(1): 14-21, January 1972

Covers local and state publications for California as well as major federal and international publications.

3. Lufburrow, Nancy C.
"Social indicators; or selected federal social statistical programs." RQ, Summer, 1977.

Describes some of the newer federal statistical series. Has an excellent bibliography. 55 references.

4. Silberg, Nancy.
Data for health planning: a selected annotated bibliography. Council of Planning Librarians, 1974.

This is a selected bibliography of books, pamphlets and articles which contain data useful for health planning. One section deals with services of data, another lists services of data by subject such as demographic, health services, and vital statistics.

5. U.S. Bureau of the Census.
Bureau of the Census catalog of publications, 1790-1972. Washington, D.C.: Government Printing Office, 1974.

A one-volume comprehensive historical bibliography of sources for Bureau of the Census statistics from 1790 to 1972 comprised of two catalogs: (1) the Catalog of U.S. census publications, 1790-1945, lists all materials issued by the Census Bureau and its predecessor organizations starting with the first census report of 1790. (2) the Census catalog of publications 1947-1972 updates the historical publication and describes the reports issued 1945-72.

6. U.S. Bureau of Health Manpower.
An annotated bibliography of publications. May 1977.

"The publications listed relate largely to health manpower supply and requirements and are designed to contribute to a better understanding of health manpower issues, developments, trends and projections." Availability and price given for each item.

Bibliography free from BHM, Manpower Analysis Branch.

7. U.S. Bureau of Labor Statistics.
Directory of data sources on racial and ethnic minorities. BLS Bulletin 1879. Washington, D.C.: Government Printing Office, 1975.

This BLS bulletin provides users of statistics on racial and ethnic minority groups with annotated references to sources of data published by the federal government.

Data sources include publications presenting social and economic characteristics of minority groups for the nation and selected areas based primarily on household surveys. Data sources not covered include vital and health statistics, and arrest and prison population statistics.

There are four major sections of this directory: blacks, persons of Spanish ancestry, other races, and other ethnic groups.

8. U.S. National Center for Health Statistics.
Current listing and topical index to the vital and health statistics series, 1962-1976. Washington, D.C.: Government Printing Office, 1976.

This is an index to health topics covered in the Vital and health statistics series according to demographic and socioeconomc variables. Section I deals with topics related to health status of people. Section II deals with health resources topics. The last section is a listing of each title in each series.

9. U.S. National Center for Health Statistics.
Selected national data sources for health planners. DHEW publication no. (1-HRA) 76-1236. Washington, D.C.: Government Printing Office, 1976.

The report updates and expands an earlier source book, Selected data sets for health planners, Volume I. Information for each data source includes publishing agency, data and periodicity, geographic area covered, population covered, and data elements. Both publications and data tapes are covered.

This report was designed to meet the needs of state and local health planners, particularly the health system agencies and the state health planning and resources development agencies established under Pulbic Law 93-641, the Health Planning and Resources Development Act of 1974.

Sources are organized under the subject areas of general health statistics, health status and problems, health care resources, national health care programs, health economics, and demographic data sources. Sections concerning environmental and occupational health will be added in the future.

10. U.S. National Center for Health Statistics.
Standardized micro-data tape transcripts. Washington, D.C. Government Printing Office, 1976. DHEW publication no. (HRA) 76-1213.

This publication describes 80 micro-data tapes which are available for purchase from the National Center for Health Statistics in 1976. The tapes are meant to fill the need of consumers who require data in a format or detail not provided in the Center's publications.

The content of each data set is described in detail. Purchase price includes costs of the magnetic tape volumes, the printed materials explaining tape content, and the documentation necessary to utilize the files.

11. Weise, Frieda.
A bibliographic guide to statistics and health planning information. Springfield, Illinois: Illinois Cooperative Health Information System, 1976. Available from NTIS. (PB 269-718)

B. Information on the Collection and Use of Health Statistics.

1. Burton, Lloyd E. and Hugh H. Smith.
Public health and community medicine. 2nd edition. Baltimore: Williams and Wilkins, 1975.

See Chapter 4. The Methodology of Public Health, pp. 111-154.

2. Freeman, Howard E.
Handbook of medical sociology. 2nd edition. Englewood Cliffs, New Jersey: Prentice-Hall, Inc. 1972.

See Chapter 2, "The sociology of Illness," pp. 63-191.

Discussion of social factors in chronic illnesses; addiction as a socioenvironmental health problem and the sociology of mental disorders.

3. Friedman, Gary D.
Primer of epidemiology. New York: Mc-Graw-Hill, 1974.

Good explanation of what epidemiology is all about. Epidemiological concepts are clearly explained as are the uses of epidemiological studies.

4. Katagawa, Evelyn and Philip M. Hansen.
Differential mortality in the U.S.: a study in socioeconomic epidemiology. Cambridge, Mass.: Harvard University Press, 1973.

5. Kosa, John and Irving Kenneth Zola, eds.
Poverty and health. Rev. ed. Cambridge, Mass.: Harvard University Press, 1975.

6. Lilienfeld, Abraham M.
Foundations of epidemology. New York: Oxford University Press, 1976.

This book presents the concepts and methods of epidemology as they apply to disease problems. It is designed as an introductory text.

See Chapter 6, "Morbidity Statistics," p. 112-142.

7. Marier, Robert.
"The reporting of communicable diseases." American Journal of Epidemiology 105(6): 587-590. June, 1977.

8. U.S. National Center for Health Statistics.
News of the cooperative health statistics system, No. 1- , 1974- . Free.

A bimonthly newsletter to provide information exchange between NCHS and state agencies collecting vital and health statistics.

Publication replaces the Registrar and Statistician.

Lists new publications of NCHS in each issue.

9. U.S. National Center for Health Statistics.
Statistical notes for health planners. No. 1- , July 1976- .

This publication is issued irregularly as a guide for health planners and others in the use of appropriate methodology for the collection and analysis of vital and health statistics. Each issue is devoted to discussion of a single topic with emphasis on existing data, for example, Infant mortality (No. 2, 1976).

10. U.S. Department of Health, Education and Welfare.
Health statistics plan, Fiscal years 1976-1977- . Washington, D.C.: Government Printing Office, 1975.

This plan is a report from the Health Data Policy Committee to the Assistant Secretary for Health and the Secretary for the Department of Health, Education and Welfare.

The plan presents the Department's current health statistics activities, with emphasis on those needing attention. A two-year action plan summarizes actions proposed for the two-year period beginning July 1, 1975.

The appendix is extensive, listing the health data activities in the Department with a brief description of each project. Included in the description is a telephone number to contact. In some cases availability of data is cited, published or otherwise.

11. U.S. Health Resources Administration.
Health Planning and Resources Development Act of 1974. DHEW publication no. (HRA) 75-14015. Washington, D.C.: Government Printing Office, 1975.

An explanation of the major provisions of the Act, PL 93-641.

12. U.S. National Center for Health Statistics.
The cooperative health statistics system: its mission and program. Vital and Health Statistics Series 4, No. 19. Washington, D.C.: Government Printing Office, 1977.

In addition to the CHSS, data needs and sources are discussed. Gives a good overview of future plans.

GLOSSARY

I. Terms Related to Vital Statistics

Vital statistics: Statistics pertaining to births, deaths, fetal deaths, marriage and divorce.

Mortality: Death; usually expressed in rates.

Crude death rate: The number of deaths reported in a calendar year per 1,000 population.

Cause specific death rate: The number of deaths from a specific cause in a calendar year per 1,000 population.

Age specific death rate: The number of deaths reported in a selected age group per 1,000 population in that same age group.

Maternal mortality rate: The number of maternal deaths attributed to puerperal causes per 1,000 live births.

Infant mortality rate: The number of deaths of infants under one year of age during a calendar year per 1,000 live births.

Neonatal mortality rate: Deaths under 28 days of age per 1,000 population.

Postneonatal mortality rate: The number of deaths which occur between the the ages of 28 days and 1 year of age per 1,000 total live births.

Perinatal mortality rate: The number of still births plus neonatal deaths per 1,000 total births.

Natality: Birth; usually expressed in rates.

Crude birth rate: The number of live births in a calendar year per 1,000 population.

Age specific birth rate: The number of live births to women in a selected age group per 1,000 women in that same age group.

General fertility rate: Number of births per 1,000 women 15-44 years of age.

II. Terms Related to Health Statistics

Communicable disease: Infectious diseases. These are the diseases generally reported as mortality statistics in the U.S. and elsewhere.

Chronic disease: Diseases which have one or more of the following characteristics:

1. are permanent
2. leave a disability
3. are caused by nonreversible pathological alteration
4. require special training of the patient for rehabilitation
5. may be expected to require a long period of supervision, observation or care

Morbidity: The extent of illness, injury or disability in a defined population. This is usually expressed in incidence or prevalence rates.

Incidence rate: The number of new cases of disease which occur during a particular time period in a particular population.

Prevalence rate: The number of cases of a given illness at a particular time per 100,000 population.

III. General Terms

Age - adjusted rate: Used to compare two population groups in which the age distribution differs. To compare the two populations, the age specific rates for each population are applied to a selected standard population.

Cohort study: An inquiry in which a group (the cohort) is chosen for the presence of a specific characteristic at a specified time and followed over a period of time for the appearance of related characteristics.
e.g. a group of diabetics followed to check the appearance of heart or renal disease.

Demography: The study of human populations including:
a. change in population size
b. composition of the population
c. the geographic distribution of population

Health status: The state of health of a specified individual, group or population. It is difficult to determine since it may be measured by the people's subjective assessment of their health. One common measure of health status is the infant mortality rate.

Life table: A mathematical model that portrays mortality conditions among a population and provides a basis for measuring longevity. With a life table one can determine:
a. the probability of dying within one year of a person's life at each age
b. the average number of years a newborn can expect to live
c. the average number of years remaining to a person at any age
d. the probability of surviving from one age to another
e. the probability of surviving for any given number of years for a person at any age

National Health Survey: Authorized by law in 1956, this program has 4 parts: 1) health interview sample of households 2) a health examination survey 3) health resources surveys 4) surveys of vital records related to births and deaths. The program is currently under the auspice of the National Center for Health Statistics. The results of the surveys appear in the Vital and Health Statistics series.

Population at risk: A particular group who because of its characteristics is particularly vulnerable to a certain illness. For example, those who smoke, have hypertension, are overweight can be considered a population at risk for developing heart disease.

SMSA (Standard Metropolitan Statistical Area): A county or group of contiguous counties which contain at least one city of 50,000 population or more.

Core List

The following 50 titles are the major publications in health statistics. The page number for the full citation and annotation in the syllabus is given for each one.

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5.	Social Indicators	38
6.	Standard Medical Almanac	37
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10.	Monthly Vital Statistics Report	16
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13.	Vital and Health Statistics Series	16
14.	Accident Facts	26
15.	Cancer Facts and Figures	Addendum
16.	Cancer Mortality by County 1950-69	27
17.	Cancer Patient Survival Reports	29
18.	Third National Cancer Survey, 1969-71, Incidence	28
19.	Facts on the Major Killing and Crippling Diseases	25
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21.	Distribution of Dentists by State, Region, District, County. . .	39
22.	Facts about Nursing	36
23.	Health Manpower: A County and Metropolitan Area Data Book. . . .	43
24.	Health Resources Statistics.	43
25.	Physician Distribution and Medical Licensure in the U.S.	39
26.	Reference Data on the Profile of Medical Practice.	40
27.	Sourcebook: Nursing Personnel	39
28.	Supply of Health Manpower: 1970 Profiles and Projections to 1990	41
	Health Facilities and Utilization	
29.	Guide to the Health Care Field	44
30.	Hospital Statistics	45
31.	Hospitals: A County and Metropolitan Area Data Book	46
32.	Length of Stay in PAS Hospitals.	44
33.	Nursing Homes: A County and Metropolitan Area Data Book	46
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35.	Medical Care Costs and Prices: Background Book.	52
36.	Social Security Bulletin and Annual Statistical Supplement . . .	49, 50
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38.	Annual Report on Dental Education	53
39.	"Education Number" of JAMA	54
40.	Facts about Nursing	36
41.	Health Professions Schools: Selected Enrollment Data, 1970-71/1977-78.	55
42.	Journal of Medical Education	55

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43. Eurohealth Handbook	Addendum
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45. American Statistics Index (If your budget allows!).	63
46. Bureau of the Census Catalog	66
47. Current Listing and Topical Index to the Vital and Health Statistics Series	12
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49. Index Medicus	64
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